

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020173

Entity Name: ACH PAYMENT SOLUTIONS, INC.

Current Principal Place of Business:

6919 TREYMORE CT.
SARASOTA, FL 34243

Current Mailing Address:

6919 TREYMORE CT.
SARASOTA, FL 34243

FEI Number: 32-0007048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAUER, JULIA W
6919 TREYMORE CT.
SARASOTA, FL 34243 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name EDELEN, RICHARD C
Address 3969 FAIRWAY DR.
City-State-Zip: NORTH PORT FL 34287

Title DST
Name SAUER, JULIA W
Address 6919 TREYMORE COURT
City-State-Zip: SARASOTA FL 34243

Title DV
Name PLAPPERT, JAMES L
Address 8 ANCHORAGE POINT
City-State-Zip: LOUISVILLE KY 40223

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIA W SAUER

SECRETARY TREASURER 03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date