

**2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000103237

**Entity Name:** PAYSMART USA, LLC

**Current Principal Place of Business:**

100 COLONIAL CENTER PARKWAY, #140  
LAKE MARY, FL 32746-4768

**Current Mailing Address:**

100 COLONIAL CENTER PARKWAY, #140  
LAKE MARY, FL 32746-4768

**FEI Number:** 20-3973860

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JONES, FRANK T  
100 COLONIAL CENTER PKWY  
SUITE 140  
LAKE MARY, FL 32746 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

**Authorized Person(s) Detail :**

Title MGR  
Name ELMER, CHRISTOPHER A  
Address 100 COLONIAL CENTER PARKWAY,  
#140  
City-State-Zip: LAKE MARY FL 32746-4768

Title MGR  
Name BAKER, DODI  
Address 100 COLONIAL CENTER PARKWAY,  
#140  
City-State-Zip: LAKE MARY FL 32746-4768

Title PRESIDENT  
Name JONES, FRANK T  
Address 100 COLONIAL CENTER PARKWAY,  
#140  
City-State-Zip: LAKE MARY FL 32746-4768

Title VP  
Name JENKINS, ROBIN E  
Address 100 COLONIAL CENTER PARKWAY,  
#140  
City-State-Zip: LAKE MARY FL 32746-4768

Title TREASURER  
Name FERGUSON, MELISSA D  
Address 100 COLONIAL CENTER PARKWAY,  
#140  
City-State-Zip: LAKE MARY FL 32746-4768

Title SECRETARY  
Name MALLORY, ANGELA R  
Address 100 COLONIAL CENTER PARKWAY,  
#140  
City-State-Zip: LAKE MARY FL 32746-4768

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRANK JONES

**PRESIDENT**

**04/03/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date