

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000003467

**Entity Name:** MONEYGRAM PAYMENT SYSTEMS, INC.

**Current Principal Place of Business:**

6701 PARKWAY CIRCLE  
BROOKLYN CENTER, MN 55430

**Current Mailing Address:**

6701 PARKWAY CIRCLE  
BROOKLYN CENTER, MN 55430 US

**FEI Number:** 84-1327808

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 PCEO  
Name PATSLEY, PAMELA  
Address 2828 N. HARWOOD STREET, 15TH FLOOR  
City-State-Zip: DALLAS TX 75201

Title TREA  
Name ANGELILLI, LARRY  
Address 2828 N. HARWOOD STREET, 15TH FLOOR  
City-State-Zip: DALLAS TX 75201

Title SEC  
Name HENRY, F. AARON  
Address 2828 N. HARWOOD STREET, 15TH FLOOR  
City-State-Zip: DALLAS TX 75201

Title VP  
Name KOHN, ALAN  
Address 2828 N. HARWOOD STREET  
City-State-Zip: DALLAS TX 75201

*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:** ALAN KOHN

**VICE PRESIDENT**

**04/23/2014**

Electronic Signature of Signing Officer/Director Detail

Date