

**2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B08000000230

**FILED  
Apr 27, 2009  
Secretary of State**

**Entity Name:** PAYMENT TRANSACTION SOLUTIONS, LP

**Current Principal Place of Business:**

1727 KIRBY PKWY-SUITE 103  
MEMPHIS, TN 38120

**New Principal Place of Business:**

**Current Mailing Address:**

1727 KIRBY PKWY-SUITE 103  
MEMPHIS, TN 38120

**New Mailing Address:**

11857 COMMONWEALTH DRIVE  
LOUISVILLE, KY 40299

FEI Number: 68-0602658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**GENERAL PARTNER INFORMATION:**

Document #: F08000004414  
Name: PAYMENT ALLIANCE GP COMPANY, INC.  
Address: 11857 COMMONWEALTH DRIVE  
City-St-Zip: LOUISVILLE, KY 402992310

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: RONALD L. ZEHNDER

CONT

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date