2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001826

Entity Name: LML PAYMENT SYSTEMS CORP.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1330 RIVER BEND DRIVE, SUITE 600 DALLAS, TX 75247						
Current Mailing Address:				New Mailing Address:		
1140 W PENDER ST SUITE 1680 VANCOUVER BRITISH COLUMBIA CANADA V6E 4G1, XX			1140 W PENDER ST SUITE 1680 VANCOUVER, BC V6E 4G1 CA			
FEI Number: 52-2084651 FEI Number Applied For () FEI Number			ber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New 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						
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	GAINES, PATRIC	D DRIVE, SUITE 600		Title: Name: Address: City-St-Zip:	()0	change () Addition
Title: Name: Address: City-St-Zip:	D () C SCHULZ, RICHAR 280 NELSON ST, VANCOUVER, BC	SUITE 468		Title: Name: Address: City-St-Zip:	D (X) C SCHULZ, RICHAR 1330 RIVER BEN DALLAS, TX 752	D DR. SUITE 600
Title: Name: Address: City-St-Zip:	CRAIG, STEPHEN	D DRIVE, SUITE 600		Title: Name: Address: City-St-Zip:	()C	change () Addition
Title: Name: Address: City-St-Zip:	V () D PEYTON, ROBER 4141 N. GRANITE DALLAS, TX 752	RT E E REEF ROAD, SUITE 214		Title: Name: Address: City-St-Zip:	()C	change () Addition
Title: Name: Address: City-St-Zip:	STENHJEM, PÉT	REEF RD., SUITE 214		Title: Name: Address: City-St-Zip:	GAINES, CAROLY	D DR., SUITE 600
Title: Name: Address: City-St-Zip:	V () C GUEST, SHAWN 1024 NORTH WE WICHITA, KS 62			Title: Name: Address: City-St-Zip:	()0	change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CAROLYN L. GAINES S 04/25/2006