2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2009
Secretary of State

DOCUMENT# F05000004071

Entity Name: INTER PAYMENT SYSTEMS, INC.

Current Principal Place of Business:

5190 NEIL ROAD , SUITE 430
RENO, NV 89502

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1591
DEERFIELD BEACH, FL 33443

New Mailing Address:

FEI Number: 88-0511660 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BENDER, M.
5850 NW 42 TERRACE
BOCA RATON, FL 33496 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTC ( ) Delete
Name: MERRITT, DONALD D
Address: 311 WEST THIRD ST.
City-St-Zip: CARSON CITY, NV 89703

Title: V ( ) Delete
Name: BENDE, MICHAEL
Address: P.O. BOX 1591
City-St-Zip: DEERFIELD BEACH, FL 33443

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
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 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: DONALD MERRITT PRES 04/19/2009
Electronic Signature of Signing Officer or Director Date