2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005299

Entity Name: GLOBAL CASH ACCESS, INC.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3525 E. POST ROAD, SUITE 120 LAS VEGAS, NV 89120 **Current Mailing Address: New Mailing Address:** 3525 E. POST ROAD, SUITE 120 LAS VEGAS, NV 89120 FEI Number: 94-3309549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: () Delete () Change () Addition SANFORD, KIRK E Name: Name: 3525 E. POST ROAD, SUITE 120 Address: Address: City-St-Zip: LAS VEGAS, NV 89120 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HAGERTY, HARRY C III Name: 3525 E. POST ROAD, SUITE 120 Address: Address: LAS VEGAS, NV 89125 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition KORTSCHAK, WALTER G Name: Name: 499 HAMILTION AVE. #200 Address: Address: City-St-Zip: PALO ALTO, CA 94301 City-St-Zip: Title: () Delete Title: () Change () Addition FITZGERALD, CHARLES J Name: Name: Address: 499 HAMILTON AVE. #200 Address: City-St-Zip: PALO ALTO, CA 94301 City-St-Zip: Title: Title: () Delete () Change () Addition KIBURN, E. MILES Name: Name: 122 PRESERVATION COURT Address: Address: City-St-Zip: EADS, TN 38028 City-St-Zip: Title: () Delete Title: () Change () Addition HARRIS, WILLIAM Name: Name: 137 MOORE ROAD Address: Address: City-St-Zip: City-St-Zip: WOODSIDE, CA 94062

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: KIRK E. SANFORD DO 01/09/2007