2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2009
Secretary of State

DOCUMENT# F05000005299

Entity Name: GLOBAL CASH ACCESS, INC.

Current Principal Place of Business:

3525 E. POST ROAD, SUITE 120
LAS VEGAS, NV 89120

New Principal Place of Business:

Current Mailing Address:

3525 E. POST ROAD, SUITE 120
LAS VEGAS, NV 89120

New Mailing Address:

FEI Number: 94-3309549 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DO	( ) Delete
Name:	BETTS, SCOTT H	
Address:	3525 E. POST ROAD, SUITE 120	
City-St-Zip:	LAS VEGAS, NV 89120	
Title:	O	( ) Delete
Name:	BETTS, SCOTT H	
Address:	3525 E. POST ROAD, SUITE 120	
City-St-Zip:	LAS VEGAS, NV 89125	
Title:	D	( ) Delete
Name:	KORTSCHAK, WALTER G	
Address:	499 HAMILTION AVE. #200	
City-St-Zip:	PALO ALTO, CA 94301	
Title:	D	(X) Delete
Name:	FITZGERALD, CHARLES J	
Address:	499 HAMILTON AVE. #200	
City-St-Zip:	PALO ALTO, CA 94301	
Title:	D	(X) Delete
Name:	KIBURN, E. MILES	
Address:	122 PRESERVATION COURT	
City-St-Zip:	EADS, TN 38028	
Title:	D	(X) Delete
Name:	JUDGE, GEOFFREY P	
Address:	90 RIVERSIDE DRIVE, #95	
City-St-Zip:	NEW YORK, NY 10024	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KILBURN, EDWIN M	
Address:	12 MEADOW LANE	
City-St-Zip:	MERCER ISLAND, WA 98074	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: SCOTT H. BETTS DO 05/18/2009

Electronic Signature of Signing Officer or Director — Date