

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005475

Entity Name: CLEAR2PAY AMERICAS, INC.

FILED
Jan 23, 2008
Secretary of State

Current Principal Place of Business:

470 ATLANTIC AVENUE
4TH FLOOR
BOSTON, MA 02111 US

Current Mailing Address:

470 ATLANTIC AVENUE
4TH FLOOR
BOSTON, MA 02111 US

New Principal Place of Business:

45 BRAINTREE HILL OFFICE PARK
SUITE 202
BRAINTREE, MA 02184 US

New Mailing Address:

45 BRAINTREE HILL OFFICE PARK
SUITE 202
BRAINTREE, MA 02184 US

FEI Number: 20-3501194

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPST () Delete
Name: ELLIS, MATTHEW M
Address: 470 ATLANTIC AVENUE, 4TH FLOOR
City-St-Zip: BOSTON, MA 02111 US

Title: D () Delete
Name: AKKERMANS, MICHEL
Address: 470 ATLANTIC AVENUE, 4TH FLOOR
City-St-Zip: BOSTON, MA 02111 US

Title: D () Delete
Name: INGELS, JURGEN
Address: 470 ATLANTIC AVENUE, 4TH FLOOR
City-St-Zip: BOSTON, MA 02111 US

Title: AS () Delete
Name: BALFE, MICHAEL R
Address: 1000 FRANKLIN VILLAGE DRIVE
City-St-Zip: FRANKLIN, MA 02038 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change () Addition
Name: ELLIS, MATTHEW M
Address: 45 BRAINTREE HILL OFFICE PARK, SUITE 202
City-St-Zip: BRAINTREE, MA 02184 US

Title: D (X) Change () Addition
Name: AKKERMANS, MICHEL
Address: 45 BRAINTREE HILL OFFICE PARK, SUITE 202
City-St-Zip: BRAINTREE, MA 02184 US

Title: D (X) Change () Addition
Name: INGELS, JURGEN
Address: 45 BRAINTREE HILL OFFICE PARK, SUITE 202
City-St-Zip: BRAINTREE, MA 02184 US

Title: AS (X) Change () Addition
Name: BALFE, MICHAEL R
Address: 19 LANTERN LANE
City-St-Zip: MILTON, MA 02186 US

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: MICHAEL R .BALFE

AS

01/23/2008

Electronic Signature of Signing Officer or Director

Date