2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2012
Secretary of State

DOCUMENT# F10000005545

Entity Name: CRANE PAYMENT SOLUTIONS INC.

Current Principal Place of Business:

5 INDUSTRIAL WAY
SALEM, NH 03079

New Principal Place of Business:

Current Mailing Address:

C/O CRANE CO.
100 FIRST STAMFORD PLACE
STAMFORD, CT 06907

New Mailing Address:

C/O CRANE CO.
100 FIRST STAMFORD PLACE
STAMFORD, CT 06902

FEI Number: 04-2442223 **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

OFFICERS AND DIRECTORS:

Title: AS
Name: DEE, CHRISTOPHER
Address: 100 FIRST STAMFORD PLACE
City-St-Zip: STAMFORD, CT 06902

Title: D
Name: FAST, ERIC C
Address: 100 FIRST STAMFORD PLACE
City-St-Zip: STAMFORD, CT 06902

Title: VTD
Name: KRAWITT, ANDREW L
Address: 100 FIRST STAMFORD PLACE
City-St-Zip: STAMFORD, CT 06902

Title: D
Name: MAUE, RICHARD A
Address: 100 FIRST STAMFORD PLACE
City-St-Zip: STAMFORD, CT 06902

Title: PD
Name: ELLIS, BRADLEY L
Address: 12955 ENTERPRISE WAY
City-St-Zip: BRIDGETON, MO 63044

Title: AT
Name: PASSARELLI, SINA A
Address: 100 FIRST STAMFORD PLACE
City-St-Zip: STAMFORD, CT 06902

I hereby 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 all other like empowered.

SIGNATURE: SINA PASSARELLI AT 03/30/2012

Electronic Signature of Signing Officer or Director — Date