2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# L03000002042

Entity Name: THE PAYMENT PROS, LLC

Current Principal Place of Business:

745 U.S. HWY. ONE-FEDERAL HWY., SUITE 207
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

745 U.S. HWY. ONE
SUITE 207
NORTH PALM BEACH, FL 33408

Current Mailing Address:

745 U.S. HWY. ONE-FEDERAL HWY., SUITE 207
NORTH PALM BEACH, FL 33408

New Mailing Address:

745 U.S. HWY. ONE
SUITE 207
NORTH PALM BEACH, FL 33408

FEI Number: 05-0551817 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROTTKAMP, MICHAEL
745 U.S. HWY. ONE-FEDERAL HWY., SUITE 207
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

ROTTKAMP, MICHAEL
745 U.S. HWY. ONE
SUITE 207
NORTH PALM BEACH, FL 33408 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: _____ 01/07/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MARTIN, DANIEL
Address: P.O. BOX 700
City-St-Zip: ANGEL FIRE, NM 87710 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL MARTIN CEO 01/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date