

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000056776

FILED
Mar 08, 2006
Secretary of State

Entity Name: MERCHANTS CHOICE PROCESSING, LLC

Current Principal Place of Business:

6709 RIDGE ROAD
SUITE 113
PORT RICHEY, FL 34668 US

New Principal Place of Business:

6709 RIDGE ROAD
SUITE 130
PORT RICHEY, FL 34668 US

Current Mailing Address:

6709 RIDGE ROAD
SUITE 113
PORT RICHEY, FL 34668 US

New Mailing Address:

6709 RIDGE ROAD
SUITE 130
PORT RICHEY, FL 34668 US

FEI Number: 56-2518005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALE, JACK
6709 RIDGE ROAD
SUITE 113
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

ANGEL, GARYN I
6709 RIDGE ROAD
SUITE 113
PORT RICHEY, FL 34668 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: GARYN I ANGEL

03/08/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ANGEL, GARYN
Address: 8010 BRIGHTON DR
City-St-Zip: PORT RICHEY, FL 34668 US

Title: MGRM (X) Delete
Name: IVESTER, STEVEN
Address: 6709 RIDGE ROAD SUITE 113
City-St-Zip: PORT RICHEY, FL 34668 US

Title: MGRM (X) Delete
Name: GALE, JACK
Address: 6709 RIDGE ROAD SUITE 113
City-St-Zip: PORT RICHEY, FL 34668 US

Title: MGRM (X) Delete
Name: CAMPBELL, SCOTT
Address: 6709 RIDGE ROAD SUITE 113
City-St-Zip: PORT RICHEY, FL 34668 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: GARYN I ANGEL

MGRM

03/08/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date