

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000078489

FILED
May 08, 2008
Secretary of State

Entity Name: TRANSACTION MONEY SERVICES, LLC

Current Principal Place of Business:

6249 PRESIDENTIAL CT SW
STE E
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

6249 PRESIDENTIAL CT SW
STE E
FT MYERS, FL 33919

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HL STATUTORY AGENT, INC.
800 LAUREL OAK DRIVE
#600 M&I BUILDING
NAPLES, FL 34108 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GREENE, GARY N
Address: 1530 MORENO AVE
City-St-Zip: FT MYERS, FL 33901

Title: MGRM () Delete
Name: EDELL, GREGORY T
Address: 1531 MORENO AVE
City-St-Zip: FT MYERS, FL 33901

Title: MGRM () Delete
Name: CONNELLY, ROWAN T
Address: 5380 FAIRFIELD WAY
City-St-Zip: FT MYERS, FL 33919

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:

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: GARY N. GREENE

MGRM

05/08/2008

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