2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000070

Entity Name: MONEY TREE ATM SERVICES, L.C.

Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11 EGLIN PARKWAY, SUITE 3 130 STAFF DRIVE

FORT WALTON BEACH, FL 32548 FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

P.O. BOX 4247

FORT WALTON BEACH, FL 32549

FEI Number: 59-3549079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCGEE, DAVID L 3 WEST GARDEN STREET, SUITE 700 PENSACOLA, FL 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.

Title:

SIGNATURE:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

() Delete

(X) Change () Addition INTEGRATED FINANCIAL, SYSTEMS, L.C. INTEGRATED FINANCIAL, SYSTEMS, L.C. Name: Name:

Address: 11 EGLIN PARKWAY, SUITE 3 Address: P.O. BOX 4247

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32549

Title: () Delete Title: (X) Change () Addition Name: INTEGRATED FINANCIAL, SYSTEMS, L.C. Name: INTEGRATED FINANCIAL, SYSTEMS, L.C.

Address: 11 EGLIN PARKWAY, SUITE 3 Address: P.O. BOX 4247

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32549

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRADFORD FLETCHER 04/29/2005