2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N96000006013

₹I FILED Jun 04, 2012 Secretary of State

Entity Name: CREDIT CARD MANAGEMENT SERVICES, INC.

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

4611 OKEECHOBEE BLVD., SUITE 114 1325 N CONGRESS AVE

WEST PALM BEACH, FL 33417 US STE 201

WEST PALM BEACH, FL 33422 US

Current Mailing Address: New Mailing Address:

4611 OKEECHOBEE BLVD., SUITE 114 PO BOX 220597

WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33422 US

FEI Number: 31-1483386 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:

DONOHUE, PAUL 8605 DOVERBROOK DR

PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DIR

Name: HUDAK, JUNE Address: PO BOX 220597

City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DIR

Name: CURRAN, MATTHEW Address: PO BOX 220597

City-St-Zip: WEST PALM BEACH, FL 33422

Title: DIR

Name: STAHURA, KURT Address: PO BOX 220597

City-St-Zip: WEST PALM BEACH, NV 33422

Title: F

Name: DONOHUE, PAUL L JR Address: PO BOX 220597

City-St-Zip: WEST PALM BEACH, FL 33422

Title: DIR

Name: SUTCH, JAMES H Address: PO BOX 220597

City-St-Zip: WEST PALM BEACH, FL 33422

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL L DONOHUE PRES 06/04/2012