2002 UNIFORM BUSINESS REPORT (UBR)

P01000042876

1. Entity Name

ATM SERVICES INTERNATIONAL, INC.

Principal Place of Business

DOCUMENT #

Mailing Address

175 PASSAGE DRIVE

P O BOX 250

ORANGE PARK FL 32003

ORANGE PARK FL 32067-0250

2. Principal Place of Bysiness	3. Mailing Address
31084 Baltusrol CT	P.O. Box 250
Suite, Apt. #, etc.	Suite, Apt. #, etc.

FILED May 12, 2002 8:00 am Secretary of State

05-12-2002 90723 001 ***300.00



Juite, Apr	. w, etc.		Suite, Apr. #, etc.	Suite, Apr. #, etc.				DO NOT WHITE IN THIS SPACE					
City & Sta	te _	·	City & State	······································		4 . F	El Number			Ar	oplied For	٦	
Green G	ove Spri	ings, th	Orange Park,	FL		j	59-371	808		No	ot Applicable]	
320	43	Country USA	Zip 32.067-02.50	Count	TSA	5. (Certificate of Status	Desired		.75 Add Require			
-	6. Name	and Address of Curren	t Registered Agent			7. 1	lame and Address	of New Regi	stered Age	nt		4	
BLEVINS, LARRY J WONDASSAGE DRIVEN 3684 Baltusrol Ct ORANGE PARK FL 32003 Green Cove Springs FL 3204				32043								-	
8. The above	named entity	v submits this statement f	or the purpose of changing its	s registere	d office or	registered ag	ent or both in the S	tate of Florid	FL	-		-	
SIGNATURE	Signature, typed	A Blowns of printed name of registered agen ible to satisfy its Intangibl	Larry J. (NO	Blev TE: Registered	INS -	Pres			-28- DATE	02			
Tax filing (See crite	_	and elects to do so.	After May 1, 20 Make Check Paya	002 Fee v	vill be \$5	50.00 t of State	10. Election Carr Trust Fund C	ontribution.		Added	0 May Be d to Fees	_	
11.	125	OFFICERS AND	DIRECTORS	12.			DITIONS/CHANGES	TO OFFICE	RS AND DIF	RECTOR	S IN 11	_ ا	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3684	Blevins Baltusrol Ct Cove Springs	_		T ADDRESS		Jare Jr. Hinsdale Ave . Co 80128	;		Change	☐ Addition	F034 (9/01	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Robert 297 W	Villare estwood br.	☐ Delete			DIR	CO 00.20			Change	Addition	180	
	Kevin M 1207 La	ry NJ 08096 RED Monahan ake Pt Pl. Park, Fl. 3	□ Delete		T ADDRESS ST-ZIP					Change	☐ Addition		
TITLE NAME	SEC' Lisa Re	igan intree Thail	☐ Delete		T ADDRESS ST-ZIP			,,,		Change	☐ Addition	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DiR Robert 2533 J	Wagner Tronwood Ct Park, FL 32	□ Delete	TITLE NAME STREE CITY-S	T ADDRESS					Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Vorhees k Ave City, Fl 32	□ Delete	TITLE NAME STREE CITY-S	T ADDRESS					Change	Addition		
13. I hereby of	certify that the	information supplied with	n this filing does not qualify fo	or the exem	nption state	ed in Section 1	19.07(3)(i), Florida S	Statutes, I fur	ther certify the	hat the in	or director		

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that fam an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

4-28-02

904-529-7885