


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000042876 1. Entity Name ATM SERVICES INTERNATIONAL, INC.	
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Principal Place of Business 1536 KINGSLEY AVE STE. 116 ORANGE PARK, FL 32073	Mailing Address 1536 KINGSLEY AVE STE. 116 ORANGE PARK, FL 32073
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DO NOT WRITE IN THIS SPACE

04132006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3718081	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BLEVINS, LARRY J
740 TARA FARMS DR.
MIDDLEBURG, FL 32068**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Larry Blevins* (NOTE: Registered Agent signature required when reinstating) DATE 4/25/06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLEVINS, LARRY 738 TARA FARMS DR. MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VILLARE, ROBERT 297 WESTWOOD DR WOODBURY, NJ 08096
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAGNER, ROBERT 2533 IRONWOOD CT. ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VORHEES, TERRY 1315 PARK AVE. ORANGE CITY, FL 32763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Larry Blevins* Larry Blevins DATE 4/25/06 DAYTIME PHONE # 904-264-2274