

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042876

FILED
Mar 26, 2008
Secretary of State

Entity Name: ATM SERVICES INTERNATIONAL, INC.

Current Principal Place of Business:

1536 KINGSLEY AVE
STE. 116
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

1536 KINGSLEY AVE
STE. 116
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-3718081 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLEVINS, LARRY
Address: 740 TARA FARMS DR.
City-St-Zip: MIDDLEBURG, FL 32068

Title: V () Delete
Name: WARE, CHARLES JR
Address: 3403 MOUNTAIN RIDGE COURT
City-St-Zip: PARK CITY, UT 84060

Title: T () Delete
Name: WAGNER, ROBERT
Address: 2533 IRONWOOD CT.
City-St-Zip: ORANGE PARK, FL 32065

Title: D () Delete
Name: VORHEES, TERRY
Address: 1315 PARK AVE.
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: HAMILTON, THOMAS
Address: 925 HANOVER DR
City-St-Zip: VIRGINIA BEACH, VA 23464

Title: S () Delete
Name: ENNEY, CAROL
Address: 310 PEBBLE BEACH DR
City-St-Zip: PERRY, GA 31069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: QUARLES, DAVE
Address: 6605 5TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

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

SIGNATURE: LARRY BLEVINS

P

03/26/2008

Electronic Signature of Signing Officer or Director

_____ Date