2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061090

Entity Name: ALLIANCE MERCHANT SERVICES, INC.

FILED Aug 07, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
300 S ORAI SUITE 1120 ORLANDO,)					
Current Mailing Address:			New Maili	New Mailing Address:		
300 S ORANGE AVE SUITE 1120 ORLANDO, FL 32801			1501 FARM CREDIT DRIVE SUITE 1500 MCLEAN, VA 22102			
FEI Number:	59-3758485	FEI Number Applied For () FEI N	umber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
SUITE 4 WESTON, I	UTIVÉ PARK I FL 33331 US named entity s	ORIVE ubmits this statement for the purpose	of changing i	ts registered	office or registered agent, or both,	
SIGNATUR						
0.014/11011		c Signature of Registered Agent			Date	
		(2)(b), F.S., the corporation did not receiv Trust Fund Contribution ().	e the prior notic	e.		
OI I IOLIKO	AND DIRECT	• •	ADDITION	S/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:		ORS: Delete IAS VOOD STREET	ADDITION Title: Name: Address: City-St-Zip:	D/C ROBERTS, R	(X) Change()Addition IICH I HILLS VILLAGE DRIVE, SUITE 210	
Title: Name: Address:	D/VP () POULIOT, THOM 1206 E. RIDGEV ORLANDO, FL 3	ORS: Delete IAS VOOD STREET 32803 Delete EY VOOD STREET	Title: Name: Address:	D/C ROBERTS, R 3841 GREEN NASHVILLE, P	(X) Change () Addition RICH I HILLS VILLAGE DRIVE, SUITE 210 TN 37215 (X) Change () Addition RASEY GEWOOD STREET	
Title: Name: Address: City-St-Zip: Title: Name: Address:	D/VP () POULIOT, THOM 1206 E. RIDGEV ORLANDO, FL 3 D/P () DELOACH, CAS 1206 E. RIDGEV ORLANDO, FL 3	CORS: Delete IAS VOOD STREET 32803 Delete EY VOOD STREET 32803 Delete D VOOD STREET	Title: Name: Address: City-St-Zip: Title: Name: Address:	D/C ROBERTS, R 3841 GREEN NASHVILLE, P DELOACH, C 1206 E. RIDO ORLANDO, F D/S WADE, BILL	(X) Change () Addition IICH I HILLS VILLAGE DRIVE, SUITE 210 TN 37215 (X) Change () Addition ASEY GEWOOD STREET IL 32803 (X) Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	D/VP () POULIOT, THOM 1206 E. RIDGEV ORLANDO, FL 3 D/P () DELOACH, CAS 1206 E. RIDGEV ORLANDO, FL 3 D/S () DELOACH, DAV 1206 E. RIDGEV ORLANDO, FL 3	CORS: Delete IAS VOOD STREET 32803 Delete EY VOOD STREET 32803 Delete D VOOD STREET	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	D/C ROBERTS, R 3841 GREEN NASHVILLE, P DELOACH, C 1206 E. RIDC ORLANDO, F D/S WADE, BILL 3841 GREEN NASHVILLE, C EDWARDS, X	(X) Change () Addition RICH I HILLS VILLAGE DRIVE, SUITE 210 TN 37215 (X) Change () Addition ASEY BEWOOD STREET EL 32803 (X) Change () Addition I HILLS VILLAGE DRIVE, SUITE 210 TN 37215 () Change (X) Addition JIM I HILLS VILLAGE DRIVE, SUITE 210 JIM I HILLS VILLAGE DRIVE, SUITE 210	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTIAN FADEL S 08/07/2006