2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153671

Entity Name: NETBANK PAYMENT SYSTEMS, INC.

FILED Feb 10, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 200 BRIARWOOD WEST DRIVE JACKSON, MS 39206 **Current Mailing Address: New Mailing Address:** 200 BRIARWOOD WEST DRIVE JACKSON, MS 39206 FEI Number: 64-0855235 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: CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROSS, WILLIAM H Name: Name: ROSS, WILLIAM M 9710 TWO NOTCH RD 9710 TWO NOTCH RD Address: Address: City-St-Zip: COLUMBIA, SC 29223 City-St-Zip: COLUMBIA, SC 29223 Title: Title: () Delete DO (X) Change () Addition Name: HERBERT, STEVEN F Name: HERBERT, STEVEN F 9710 TWO NOTCH RD 9710 TWO NOTCH RD Address: Address: City-St-Zip: COLUMBIA, SC 29223 City-St-Zip: COLUMBIA, SC 29223 (X) Change () Addition Title: () Delete Title: D O GLENN, TOMMY L JR GLENN, TOMMY L JR Name: Name: 200 BRIARWOOD WEST DRIVE 200 BRIARWOOD WEST DRIVE Address: Address: City-St-Zip: JACKSON, MS 32906 City-St-Zip: JACKSON, MS 32906 Title: () Delete Title: () Change (X) Addition MAPSON, CHARLES E Name: Name: Address: Address: 9710 TWO NOTCH RD City-St-Zip: City-St-Zip: COLUMBIA, SC 29223 Title: Title: () Change (X) Addition () Delete JOURDAIN, BETH Name: Name: Address: 9710 TWO NOTCH RD Address: City-St-Zip: City-St-Zip: COLUMBIA, SC 29223 Title: () Delete Title: () Change (X) Addition Name: Name: CHATHAM, LLOYD 200 BRIARWOOD WEST DRIVE Address: Address: City-St-Zip: City-St-Zip: JACKSON, MS 39206

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LLOYD CHATHAM Ο 02/10/2004