

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000126520

Entity Name: SEGREGATED PAYMENTS INC.

FILED
Aug 20, 2008
Secretary of State

Current Principal Place of Business:

3111 NORTH UNIVERSITY DRIVE
SUITE 705
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3111 NORTH UNIVERSITY DRIVE
SUITE 705
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 14-2009935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVERAGE CAPITAL RESOURCES, INC.
4935 KENSINGTON CIRCLE
CORAL SPRINGS, FL 33076 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BEARDSLEY, CATHERINE M
Address: 738 AURELIA STREET
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: WELLS, DAVID M
Address: 3360 SE 1 CT
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S, T (X) Change () Addition
Name: STERNBACH, GIL
Address: 4935 KENSINGTON CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33076

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: GIL STERNBACH

SECT

08/20/2008

Electronic Signature of Signing Officer or Director

Date