

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09167

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: DE LA RUE CASH SYSTEMS INC.

## Current Principal Place of Business:

2441 WARRENVILLE ROAD  
100  
LISLE, IL 60532

## New Principal Place of Business:

## New Mailing Address:

## Current Mailing Address:

100 POWERS CT  
DULLES, VA 20166

2441 WARRENVILLE ROAD  
100  
LISLE, IL 60532

FEI Number: 25-1515167

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: SD ( ) Delete  
Name: TURNER, JONATHAN H  
Address: 705 S. 12TH STREET  
City-St-Zip: WATERTOWN, WI 53094

Title: PD ( ) Delete  
Name: MROZ, GARY D  
Address: 2441 WARRENVILLE RD  
City-St-Zip: LISLE, IL 60532

Title: D ( ) Delete  
Name: VANZEE, STEVEN D  
Address: 2441 WARRENVILLE RD  
City-St-Zip: LISLE, IL 60532

Title: T (X) Delete  
Name: ELDREDGE, TROY S  
Address: 100 POWERS CT  
City-St-Zip: DULLES, VA 20166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition  
Name: REAGAN, CHRIS T  
Address: 2441 WARRENVILLE RD  
City-St-Zip: LISLE, IL 60532

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

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

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: STEVEN D VANZEE

D

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date