

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90070 032 ***150.00

DOCUMENT # P10205

1. Entity Name
HSBC PAY SERVICES INC.



Principal Place of Business
**2700 SANDERS ROAD
PROSPECT HEIGHTS, IL 60070 US**

Mailing Address
**2700 SANDERS ROAD
PROSPECT HEIGHTS, IL 60070 US**



2. Principal Place of Business

3. Mailing Address

03282006 Chg-P CR2E034 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
51-0267996

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME **KELLY, COLIN P.**
STREET ADDRESS **2700 SANDERS ROAD**
CITY-ST-ZIP **PROSPECT HEIGHTS, IL 60070**

TITLE VS ☐ Delete
NAME **CARLSON, MICHAEL M.**
STREET ADDRESS **2700 SANDERS ROAD**
CITY-ST-ZIP **PROSPECT HEIGHTS, IL 60070**

TITLE TAS ☐ Delete
NAME **MICKEY, DENNIS J.**
STREET ADDRESS **2700 SANDERS ROAD**
CITY-ST-ZIP **PROSPECT HEIGHTS, IL 60070**

TITLE DVP ☐ Delete
NAME **SODEIKA, LISA M.**
STREET ADDRESS **2700 SANDERS ROAD**
CITY-ST-ZIP **PROSPECT HEIGHTS, IL 60070**

TITLE DVP ☐ Delete
NAME **POLAYES, FAYE M.**
STREET ADDRESS **2700 SANDERS ROAD**
CITY-ST-ZIP **PROSPECT HEIGHTS, IL 60070**

TITLE AS ☐ Delete
NAME **ANGELO, J.M.**
STREET ADDRESS **2700 SANDERS ROAD**
CITY-ST-ZIP **PROSPECT HEIGHTS, IL 60070**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition
NAME **Stamm B. Gonabe**
STREET ADDRESS **same**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joseph M. Angelo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph M. Angelo
Date

4/3/2006

847.564.6058
Daytime Phone #