2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# P17884

Entity Name: EPS SETTLEMENTS GROUP, INC.

Current Principal Place of Business:

7100 E. BELLEVIEW AVENUE
SUITE 300
GREENWOOD VILLAGE, CO 80111 US

New Principal Place of Business:

Current Mailing Address:

7100 E. BELLEVIEW AVENUE
SUITE 300
GREENWOOD VILLAGE, CO 80111 US

New Mailing Address:

FEI Number: 95-4134668 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PD ( ) Delete
Name: COSTELLO, JOSEPH M
Address: 7100 E. BELLEVIEW AVENUE, # 300
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: CEOD ( ) Delete
Name: BOWERS, JEFFREY S
Address: 12825 FLUSHING MEADOW DRIVE 2ND FLOOR
City-St-Zip: SAINT LOUIS, MO 63131 US

Title: VSTD ( ) Delete
Name: COLEMAN, SEAN J
Address: 5 CONCOURSE PARKWAY, STE. 2100
City-St-Zip: ATLANTA, GA 30328 US

Title: D ( ) Delete
Name: DIAMANTIS, CHRISTOPHER E
Address: 3500 FINANCIAL PLAZA, 4TH FLOOR
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: D ( ) Delete
Name: SULIVAN, GERALD J
Address: 800 W. 6TH STREET, STE. 1800
City-St-Zip: LOS ANGELES, CA 90017 US

Title: D ( ) Delete
Name: BOLLMAN, KYLE M
Address: 3500 FINANCIAL PLAZA, 4TH FLOOR
City-St-Zip: TALLAHASSEE, FL 32312 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEOD (X) Change ( ) Addition
Name: BOWERS, JEFFREY S
Address: 12444 POWERSCOURT DRIVE, STE. 360
City-St-Zip: SAINT LOUIS, MO 63131 US

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

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

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: NANCY L. ERBECK AS 04/21/2009

Electronic Signature of Signing Officer or Director Date