

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90039 019 ***150.00

DOCUMENT # P35849

1. Entity Name
DEPOSIT PAYMENT PROTECTION SERVICES, INC.



Principal Place of Business
**8501 N SCOTTSDALE
300
SCOTTSDALE, AZ 85253**

Mailing Address
**8501 N SCOTTSDALE
300
SCOTTSDALE, AZ 85253**

50016032



2. Principal Place of Business

3. Mailing Address

02022005 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
91-1129953

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **ROMAIN, MARTIN**
STREET ADDRESS **7805 HUDSON RD, SUITE 100**
CITY-ST-ZIP **WOODBURY, MN 55125**

TITLE **VP** ☐ Delete
NAME **BOUCHER, JAMES J**
STREET ADDRESS **1550 E 79TH ST STE 700**
CITY-ST-ZIP **MINNEAPOLIS, MN 554251138**

TITLE **S** ☒ Delete
NAME **LESSER, JESSICA**
STREET ADDRESS **3501 N. SCOTTSDALE RD #300**
CITY-ST-ZIP **PARADISE VALLEY, AZ 85253**

TITLE **T** ☐ Delete
NAME **GRESHAM, GEORGE**
STREET ADDRESS **8501 N. SCOTTSDALE RD., #300**
CITY-ST-ZIP **SCOTTSDALE, AZ 85253**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Juliet Ann Lim**
STREET ADDRESS **8501 N Scottsdale Rd #300**
CITY-ST-ZIP **Scottsdale, Az 85253**

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

TITLE ☐ Change ☐ Addition
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 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 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, without other like empowered.

SIGNATURE:

George Gresham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-09-05
Date

480-629-1455
Daytime Phone #