

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35849

FILED
Apr 09, 2010
Secretary of State

Entity Name: DEPOSIT PAYMENT PROTECTION SERVICES, INC.

Current Principal Place of Business:

601 RIVERSIDE AVE
12TH FL
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

11601 ROOSEVELT BLVD.
ST. PETERSBURG, FL 33716 US

Current Mailing Address:

601 RIVERSIDE AVE
12TH FL
JACKSONVILLE, FL 32204 US

New Mailing Address:

11601 ROOSEVELT BLVD.
ST. PETERSBURG, FL 33716 US

FEI Number: 91-1129953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: PD
Name: ROESE, WILLIAM C
Address: 11601 ROOSEVELT BLVD.
City-St-Zip: ST. PETERSBURG, FL 33716 US

Title: VPST
Name: CRAVEY, LYNN
Address: 11601 ROOSEVELT BLVD.
City-St-Zip: ST. PETERSBURG, FL 33716 US

Title: DIR
Name: CRAVEY, LYNN
Address: 11601 ROOSEVELT BLVD.
City-St-Zip: ST. PETERSBURG, FL 33716 US

I hereby 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 all other like empowered.

SIGNATURE: KELLY LETTMANN

POA

04/09/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date