2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004200

Entity Name: ADVANCED MERCHANT SERVICES, INC.

FILED May 04, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

2233 PARK AVE 4139 - C SHOAL LINE BLVD SUITE 103 HERNANDO BEACH, FL 34607 ORANGE PARK, FL 32073

Current Mailing Address: New Mailing Address:

2233 PARK AVE 4139 - C SHAOL LINE BLVD. SUITE 103 HERNANDO BEACH, FL 34607 ORANGE PARK, FL 32073

FEI Number: 59-3564254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FELTS, JASON A

2233 PARK AVE

SUITE 103

JACKSONVILLE, FL 32073 US

FELTS, JASON A

4139 - C SHOAL LINE BLVD.

HERNANDO BEACH, FL 34607 US

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: JASON A FELTS 05/04/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: FELTS, JASON Name: FELTS, JASON

Address: 2233 PARK AVE SUITE 103 Address: 4139 - C SHOAL LINE BLVD.
City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: HERNANDO BEACH, FL 34607

Title: VP () Delete Title: ST (X) Change () Addition

Name: FELTS, KELLY Name: FELTS, KELLY

Address: 2233 PARK AVE SUITE 103 Address: 4139 - C SHAOL LINE BLVD.
City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: HERNANDO BEACH, FL 34607

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON A. FELTS P 05/04/2006