

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # V49859 | |
| 1. Entity Name PAYMASTER SERVICE CORP. | |
| Principal Place of Business 2550 26TH STREET WEST BRADENTON, FL 34205 | Mailing Address 2550 26TH STREET WEST BRADENTON, FL 34205 |



02122008 No Chg-P CR2E034 (11/05)

| | |
|---|--|
| 4. FEI Number 65-0345454 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

DO NOT WRITE IN THIS SPACE

| | |
|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent | |
| REINEMEYER, JACK 2550 26TH STREET WEST BRADENTON, FL 34205 | DO NOT WRITE IN THIS SPACE |

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| | | |
|---|---|---|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | 000000842777 03/11/08-80044-001 150.00 |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DST REINEMEYER, JACK 2550 26TH STREET WEST BRADENTON, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP REINEMEYER, SUSAN 2550 26TH STREET WEST BRADENTON, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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 *Jack Reinemeyer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date _____ Daytime Phone # _____