

subject to a penalty fee of \$25.00.

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • This REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is

1. Corporate ID No. 95328	2. Name of Corporation MEMO Money Order Company, Inc.				a.V
3. Street Address Principal Business Office 1029 Mumma Road			^{City} Wormleysburg	PA State	13043
4. Business Phone No. 5. State of Incorporation 800-922-8079 Pennsylvania					3
6. Brief Description of the Character Sale of Money Orders and	Gift Certificates throu	gh authorized delegate	locations		
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT)	PACES BEFORE USING	ATTACHMENTS
President Name Tanya Butler			David McCorkle		= 94
Street Address			Street Address		
1029 Mumma Road			1029 Mumma Road		
City Wormleysburg	State PA	^{Zip} 17043	City Wormleysburg	PA	17043
Secretary Name Karen Wilbert			Treasurer Name Karen Wilbert		
Street Address 1029 Mumma Road			Street Address 1029 Mumma Road		
City Wormleysburg	State PA	^{Zip} 17043	City Wormleysburg	State PA	17043
8. NAMES AND ADDRESSES	S OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) [] FILL IN	SPACES BEFORE USIN	G ATTACHMENTS
Director Name All Officers are also directors			Director Name Hans Leyer		
Street Address			Street Address 1029 Mumma Road		
City	State	Zip	City	State	Zip
·			Wormleysburg	PA	17043
Director Name			Director Name		
Street Address			Street Address		
au.	State	Zip	City	State	Zîp
Ciḥ'	State	Σψ			
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of			Number of Shares	Class/Series	Par Value
State. Changes require an additional filing. See Section 9 of			100	common	1.00
instruction sheet.					
100	000			,	
This report must be executed this report must be executed	ed on behalf of the cord on behalf of the cord	poration by an authoriz poration by the receiver	Under penalty of	perjury. I declare and affirm	ds of a receiver or trustee, n that I have examined this report statements, and that all statement
		MAR 01 2		are true and correct.	⊋ 2z\10
File Date		112431	Signature		Date
Check No.	<u>B</u>)	11073/	Karen Wilb	ert	
			Print or Type Name		
Ву:			Secretary/	Treasurer	
FOR SECRETARY OF	STATE USE ONLY		Title		Form 630 Rev. 08/08