



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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 subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2020

1. Corporate ID No. 001678579

2. Name of Corporation JHA Payment Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 663 W. HIGHWAY 60

City or Town: MONETT

State: MO

Zip: 65708

Country: USA

4. Business Phone No.

4172356652

5. State of Incorporation

State: WA

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541990

6. Brief Description of the Character of Business Conducted in Rhode Island

PROVIDING PAYMENT ACTIVITY PROCESSING SERVICES TO FINANCIAL INSTITUTIONS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
PRESIDENT	DAVID B FOSS	663 W HWY 60 MONETT, MO 65708 US

TREASURER	KEVIN D WILLIAMS	663 W HWY 60 MONETT, MO 65708 US
SECRETARY	CRAIG K MORGAN	663 W HWY 60 MONETT, MO 65708 US
VICE PRESIDENT	GREGORY ADELSON	663 W HWY 60 MONETT, MO 65708 US
DIRECTOR	DAVID B FOSS	663 W HWY 60 MONETT, MO 65708 US

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	250,000.00	1000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 25 Day of February, 2020 at 12:27:20 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By KEVIN D. WILLIAMS
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

© 2007 - 2020 State of Rhode Island and Providence Plantations
All Rights Reserved