

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213515709

1.) CORPORATION NAME:

Cardtronics USA, Inc.

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1820283**

5.) STOCK INFORMATION

CLASS AUTHORIZED

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3250 BRIARPARK DRIVE STE 400

CITY/ST/ZIP: HOUSTON, TX 77042

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: STEVEN RATHGABER OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: 3250 BRIARPARK DRIVE STE 400
CITY/ST/ZIP/CO: HOUSTON, TX 77042

NAME: MICHAEL E KELLER OFFICER DIRECTOR
TITLE: SECRETARY
ADDRESS: 3250 BRIARPARK DRIVE STE 400
CITY/ST/ZIP/CO: HOUSTON, TX 77042

NAME: J CHRIS BREWSTER OFFICER DIRECTOR
TITLE: CFO
ADDRESS: 3250 BRIARPARK DRIVE
STE 400
CITY/ST/ZIP/CO: HOUSTON, TX 77042

NAME: JULI SPOTTISWOOD OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 3250 BRIARPARK DRIVE STE 400
CITY/ST/ZIP/CO: HOUSTON, TX 77042

NAME: JORGE DIAZ OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 3250 BRIARPARK DRIVE
SUITE 400
CITY/ST/ZIP/CO: HOUSTON, TX 77042

NAME: PATRICK PHILLIPS OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 3250 BRIARPARK DRIVE
SUITE 400
CITY/ST/ZIP/CO: HOUSTON, TX 77042

NAME: TIM ARNOULT TITLE: DIRECTOR ADDRESS: 3250 BRIARPARK DRIVE SUITE 400 CITY/ST/ZIP/CO: HOUSTON, TX 77042	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: MARK ROSSI TITLE: DIRECTOR ADDRESS: 3250 BRIARPARK DRIVE SUITE 400 CITY/ST/ZIP/CO: HOUSTON, TX 77042	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: DENNIS LYNCH TITLE: DIRECTOR ADDRESS: 3250 BRIARPARK DRIVE SUITE 400 CITY/ST/ZIP/CO: HOUSTON, TX 77042	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: ROBERT BARONE TITLE: DIRECTOR ADDRESS: 3250 BRIARPARK DRIVE SUITE 400 CITY/ST/ZIP/CO: HOUSTON, TX 77042	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ MICHAEL E KELLER	MICHAEL E KELLER, SECRETARY	3/29/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		