

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005905

FILED
Apr 24, 2008
Secretary of State

Entity Name: MACY'S SYSTEMS AND TECHNOLOGY, INC.

Current Principal Place of Business:

7 WEST SEVENTH ST.
CINCINNATI, OH 45202

New Principal Place of Business:

Current Mailing Address:

C/O FEDERATED CORPORATE SERVICES, INC
7 WEST SEVENTH ST
CINCINNATI, OH 45202 US

New Mailing Address:

FEI Number: 31-1419869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BRODERICK, DENNIS J
Address: 7 WEST SEVENTH ST.
City-St-Zip: CINCINNATI, OH 45202

Title: D () Delete
Name: BELSKY, JOEL
Address: 7 WEST SEVENTH ST.
City-St-Zip: CINCINNATI, OH 45202

Title: CEO () Delete
Name: COLE, TOM
Address: 5985 STATE BRIDGE RD.
City-St-Zip: DULUTH, GA 30097

Title: S () Delete
Name: BALICKI, LINDA J
Address: 611 OLIVE STREET
City-St-Zip: ST. LOUIS, MO 63101

Title: AS () Delete
Name: COX, JACK B
Address: 7 WEST SEVENTH ST.
City-St-Zip: CINCINNATI, OH 45202

Title: P () Delete
Name: LEWARK, LARRY
Address: 5986 STATE BRIDGE ROAD
City-St-Zip: DULUTH, GA 30097

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JACK B. COX

AS

04/24/2008

Electronic Signature of Signing Officer or Director

_____ Date