

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000000246

**Entity Name:** STOREFRONT SYSTEMS, INC.

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9170 OLD ATLANTA HIGHWAY  
COVINGTON, GA 30014

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1056  
COVINGTON, GA 30015

**New Mailing Address:**

**FEI Number:** 58-2067755

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KENT, DON C  
2304 KILLEARN CENTER BLVD SUITE A  
TALLAHASSEE, FL 32309 US

**Name and Address of New Registered Agent:**

KENT, DON C  
7 CUTTY SARK CT.  
PANACEA, FL 32346 US

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

04/12/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCFARLIN, III, THOMAS H  
Address: 9170 OLD ATLANTA HIGHWAY  
City-St-Zip: COVINGTON, GA 30014

Title: VP  
Name: MCFARLIN, PATTI C  
Address: 9170 OLD ATLANTA HIGHWAY  
City-St-Zip: COVINGTON, GA 30014

I hereby 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 all other like empowered.

SIGNATURE: PATTI C. MCFARLIN

VP

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date