

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000061096

FILED
Aug 12, 2009
Secretary of State

Entity Name: STOREFRONT, LLC

Current Principal Place of Business:

3097 ANTIGUA DRIVE
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

2630 US 1 SOUTH
ST. AUGUSTINE, FL 32086 US

Current Mailing Address:

3097 ANTIGUA DRIVE
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

PO BOX 3178
PONTE VEDRA BEACH, FL 32004 US

FEI Number: 26-2871767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORNSTEIN, MARK L
2 SOUTH ORANGE AVENUE
5TH FLOOR
ORLANDO, FL 32801 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALLEN, MARK
Address: 3097 ANTIGUA DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALLEN, MARK
Address: PO BOX 3178
City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

Title: VS () Change (X) Addition
Name: ALLEN, WENDI L
Address: PO BOX 3178
City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK ALLEN

MGR

08/12/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date