

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000097482

FILED
Jan 26, 2012
Secretary of State

Entity Name: SYSTEMS ONLINE SCT INC.

Current Principal Place of Business:

45 WHITCOCK LN
PALM COAST, FL 32164 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 353394
PALM COAST, FL 32135 US

New Mailing Address:

FEI Number: 45-3792867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHICKERING, LEVI L
45 WHITCOCK LN
PALM COAST, FL 32164 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

OFFICERS AND DIRECTORS:

Title: P
Name: CHICKERING, LEVI L
Address: 45 WHITCOCK LN
City-St-Zip: PALM COAST, FL 32164 US

Title: VP
Name: CHICKERING, MARK J
Address: 45 WHITCOCK LN
City-St-Zip: PALM COAST, FL 32164 US

Title: SEC
Name: CHICKERING, LEVI L
Address: 45 WHITCOCK LN
City-St-Zip: PALM COAST, FL 32164 FL

Title: T
Name: CHICKERING, LEVI L
Address: 45 WHITCOCK LN
City-St-Zip: PALM COAST, FL 32164 FL

Title: DIR
Name: CHICKERING, MARK J
Address: 45 WHITCOCK LN
City-St-Zip: PALM COAST, FL 32164 FL

Title: DIR
Name: CHICKERING, LEVI L
Address: 45 WHITCOCK LN
City-St-Zip: PALM COAST, FL 32164 FL

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: LEVI L CHICKERING

SEC

01/26/2012

Electronic Signature of Signing Officer or Director

Date