2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853590

Title:

Name:

Address:

City-St-Zip:

FILED May 04, 2007 Secretary of State

Entity Name: LANE BRYANT, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3750 STATE RD BENSALEM, PA 19020						
Current Mailing Address:			New Mailing Address:			
3750 STATE RD BSC TAX DEPT BENSALEM, PA 19020						
FEI Number:	13-3118358	FEI Number Applied For () FEI I	Number Not Appli	icable () Ce	ertificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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			Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () E NAGLER, LORNA 3750 STATE RD BENSALEM, PA		Title: Name: Address: City-St-Zip:	() Cha	ange()Addition	
Title: Name: Address: City-St-Zip:	D () E SPECTER, ERIC 3750 STATE RD BENSALEM, PA		Title: Name: Address: City-St-Zip:	DV (X) Ch SPECTER, ERIC M 3750 STATE RD BENSALEM, PA 19		
Title: Name: Address: City-St-Zip:	VP () C GLUECK, NEAL 3750 STATE RD BENSALEM, PA	Delete 19020	Title: Name: Address: City-St-Zip:	V (X) Ch GLUECK, NEAL 3750 STATE RD BENSALEM, PA 19	ange () Addition	
Title: Name: Address: City-St-Zip:	VP () E SULLIVAN, JOHN 3750 STATE RD BENSALEM, PA		Title: Name: Address: City-St-Zip:	VT (X) Ch SULLIVAN, JOHN J 3750 STATE RD BENSALEM, PA 19		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: NEAL GLUECK V 05/04/2007

() Delete

() Change (X) Addition

MADWAY, LINDA

3750 STATE RD BENSALEM, PA 19020