

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004247

FILED
Mar 08, 2005
Secretary of State

Entity Name: AE OUTFITTERS RETAIL CO.

Current Principal Place of Business:

150 THORN HILL DRIVE
WARRENDALE, PA 15086

New Principal Place of Business:

Current Mailing Address:

150 THORN HILL DRIVE
WARRENDALE, PA 15086

New Mailing Address:

FEI Number: 25-1864674 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 32301 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: TREA Delete
Name: VIGFUSSON, TREVOR
Address: 150 THORN HILL DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: VP Delete
Name: CLIFTON, DALE E
Address: 150 THORN HILL DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: ASEC Delete
Name: BASHUR, GARY A
Address: 150 THORN HILL DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: DIR Delete
Name: O'DONNELL, JAMES V
Address: 150 THORN HILL DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: SEC Delete
Name: BULMAN, NEIL JR.
Address: 150 THORN HILL DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: PRES Delete
Name: O'DONNELL, JAMES V
Address: 150 THORN HILL DRIVE
City-St-Zip: WARRENDALE, PA 15086

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
Name:
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 for the exemption stated in Section 119.07(3)(i), 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: GARY A BASHUR

ASEC

03/08/2005

Electronic Signature of Signing Officer or Director

_____ Date