

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **F94000000608 (9)**

1. Corporation Name

FACS GROUP, INC.

95 FEB - 7 PM 2: 31

Principal Place of Business

4705 DUKE DRIVE
MASON OH 45040

Mailing Address

4705 DUKE DRIVE
MASON OH 45040

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/09/1994

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

2a. Mailing Address

26 Federated Department Stores, Inc.

27 7 West Seventh Street

28 Cincinnati, Ohio

25 Country

29 45202

30 Country

30 U.S.A.

4. FEI Number

31-1397510

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when receiving)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C
NAME	ZIMMERMAN, JAMES M
STREET ADDRESS	7 WEST SEVENTH ST.
CITY - ST - ZIP	CINCINNATI OH 45202
TITLE	DS
NAME	AUERBACH, BORIS
STREET ADDRESS	7 WEST SEVENTH ST.
CITY - ST - ZIP	CINCINNATI OH 45202
TITLE	DV
NAME	BRODERICK, DENNIS J
STREET ADDRESS	7 WEST SEVENTH ST.
CITY - ST - ZIP	CINCINNATI OH 45202
TITLE	P
NAME	AMANN, JAMES
STREET ADDRESS	4705 DUKE DR.
CITY - ST - ZIP	MASON OH 45040
TITLE	T
NAME	HOGUET, KAREN
STREET ADDRESS	7 WEST SEVENTH ST.
CITY - ST - ZIP	CINCINNATI OH 45202
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	James M. Zimmerman	
1.3 STREET ADDRESS	7 West Seventh Street	
1.4 CITY - ST - ZIP	Cincinnati, OH 45202	
2.1 TITLE	DVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	John R. Sims	
2.3 STREET ADDRESS	7 West Seventh Street	
2.4 CITY - ST - ZIP	Cincinnati, OH 45202	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 in Block 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE: *Jack B. Cox*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Jack B. Cox
Assistant Secretary 2/3/95

513/579-7311

c/o 7 West Seventh Street
Cincinnati, Ohio 45202

FACS Group, Inc.

Directors:

Dennis J. Broderick
John R. Sims
James M. Zimmerman

Officers:

James M. Zimmerman	Chairman
James Amann	President
John R. Sims	Vice President & Secretary
Dennis J. Broderick	Vice President
Robert C. Seppelt	Vice President
Karen M. Hoguet	Treasurer & Assistant Secretary
Jack B. Cox	Assistant Secretary
Klaus M. Ziermaier	Assistant Secretary