

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001419

FILED
Jun 24, 2009
Secretary of State

Entity Name: PARTY CITY CORPORATION

Current Principal Place of Business:

25 GREEN POND ROAD
SUITE #1
ROCKAWAY, NJ 07866 US

New Principal Place of Business:

Current Mailing Address:

25 GREEN POND ROAD
SUITE #1
ROCKAWAY, NJ 07866 US

New Mailing Address:

FEI Number: 22-3033692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

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:

Title: P () Delete
Name: LAUBE, LISA
Address: 25 GREEN POND ROAD SUITE #1
City-St-Zip: ROCKAWAY, NJ 07866 US

Title: S () Delete
Name: ZEPF, JOSEPH J
Address: 25 GREEN POND ROAD SUITE #1
City-St-Zip: ROCKAWAY, NJ 07866 US

Title: C () Delete
Name: SMALL, ROBERT
Address: ONE BOSTON PLACE
City-St-Zip: BOSTON, MA 02108

Title: D () Delete
Name: MELNICK, GREGG A
Address: 25 GREEN POND ROAD SUITE #1
City-St-Zip: ROCKAWAY, NJ 07866 US

Title: D () Delete
Name: RITTENBERG, GERALD
Address: 80 GRASSLANDS ROAD
City-St-Zip: ELMSFORD, NY 10523

Title: D () Delete
Name: HARRISON, JAMES
Address: 80 GRASSLANDS ROAD
City-St-Zip: ELMSFORD, NY 10523

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 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.

SIGNATURE: JOSEPH J. ZEPF

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06/24/2009

Electronic Signature of Signing Officer or Director

_____ Date