

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002865

FILED
Jun 22, 2009
Secretary of State

Entity Name: CHARLOTTE RUSSE, INC.

Current Principal Place of Business:

4645 MORENA BLVD
SAN DIEGO, CA 92117

New Principal Place of Business:

Current Mailing Address:

4645 MORENA BLVD
SAN DIEGO, CA 92117

New Mailing Address:

FEI Number: 95-2960505 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 323012525 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: D () Delete
Name: ZEICHNER, BERNARD
Address: 4645 MORENA BLVD
City-St-Zip: SAN DIEGO, CA 92117

Title: S () Delete
Name: BOLINGER, JENNIFER
Address: 4645 MORENA BLVD
City-St-Zip: SAN DIEGO, CA 92117

Title: TCFO () Delete
Name: JOHNSON, PATTI
Address: 4645 MORENA BLVD
City-St-Zip: SAN DIEGO, CA 92117

Title: P () Delete
Name: HOFFMAN, MARK A
Address: 4645 MORENA BLVD.
City-St-Zip: SAN DIEGO, CA 92117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FABRICANT, EMILIA
Address: 4645 MORENA BLVD
City-St-Zip: SAN DIEGO, CA 92117

Title: S (X) Change () Addition
Name: SILNY, FREDERICK G
Address: 4645 MORENA BLVD
City-St-Zip: SAN DIEGO, CA 92117

Title: D (X) Change () Addition
Name: GOODMAN, JOHN
Address: 4645 MORENA BLVD
City-St-Zip: SAN DIEGO, CA 92117

Title: D (X) Change () Addition
Name: SALOPEK, JENNIFER
Address: 136 W. JOHNSTOWN ROAD
City-St-Zip: GAHANNA, OH 43230

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: ZINA RABINOVICH

VP

06/22/2009

Electronic Signature of Signing Officer or Director

_____ Date