## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G72585

Entity Name: CHICO'S FAS, INC.

FILED Mar 02, 2011 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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11215 METRO PARKWAY FT MYERS, FL 33966 US

Current Mailing Address: New Mailing Address:

11215 METRO PARKWAY FT MYERS, FL 33966 US

FEI Number: 59-2389435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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.

III the State of Florid

SIGNATURE: Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: SVP

Name: RHODES, ALEXANDER A Address: 12036 HIDDEN LINK DR City-St-Zip: FORT MYERS, FL 33913

Title: PD

Name: DYER, DAVID Address: 300 BEACH DRIVE

City-St-Zip: ST. PETERSBURG, FL 33701

Title: VP

 Name:
 BITZER, BRIAN J

 Address:
 3910 SE 37TH ST

 City-St-Zip:
 CAPE CORAL, FL 33914

Title: VPT

Name: SCHOCKLING, KEVIN R Address: 19376 LA SERENA DRIVE City-St-Zip: FORT MYERS, FL 33967

Title: VP

Name: KLEEBERGER, KENT
Address: 848 ANGEL WING DRIVEZ
City-St-Zip: SANIBEL, FL 33948

Title: D

Name: GIBSON, VERNA K

Address: 6940 TEMPERANCE POINT COURT City-St-Zip: WESTERVILLE, OH 43082

I hereby 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 all other like empowered.

SIGNATURE: KEVIN R. SCHOCKLING VPT 03/02/2011