

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003106

Entity Name: EWING COLE, INC.**Current Principal Place of Business:**100 NORTH 6TH STREET
PHILADELPHIA, PA 19106**Current Mailing Address:**100 NORTH 6TH STREET
PHILADELPHIA, PA 19106**FEI Number:** 23-1891628**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CFO, OFFICER
Name KELLY, JOSEPH T.
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title OFFICER
Name HEBDEN, STEVEN M
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title CEO, OFFICER
Name LOOS, JARED J.
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title PRESIDENT, OFFICER
Name MCCONNELL, ROBERT A.
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title VP, OFFICER
Name FALLON, KEITH
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title OFFICER
Name WILSON, JAMES A.
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title SECRETARY, OFFICER
Name RUDY, ROGER B.
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title DIRECTOR
Name FRAZIER, MARY
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

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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: JOSEPH T. KELLY**TREASURER****04/24/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JOESTEN, ERIC
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title DIRECTOR
Name SANCHEZ, AITOR
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title DIRECTOR
Name LEHMAN, MICHAEL
Address 15231 LAGUNA CANYON ROAD
SUITE 200
City-State-Zip: IRVINE CA 92618

Title DIRECTOR
Name MCCULLOUGH, WILLIAM
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106

Title DIRECTOR
Name WELSH, PETER
Address 100 NORTH 6TH STREET
City-State-Zip: PHILADELPHIA PA 19106