2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005905

Entity Name: MACY'S SYSTEMS AND TECHNOLOGY, INC.

Current Principal Place of Business:

7 WEST SEVENTH ST. CINCINNATI. OH 45202

Current Mailing Address:

C/O FEDERATED CORPORATE SERVICES, INC 7 WEST SEVENTH ST CINCINNATI. OH 45202 US

Certificate of Status Desired: No FEI Number: 31-1419869

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 17, 2014

Secretary of State

CC4805812766

Officer/Director Detail:

Title Title D

Name BRODERICK, DENNIS J Name BELSKY, JOEL

Address 7 WEST SEVENTH ST. Address 7 WEST SEVENTH ST. City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202

CHIEF OMNICHANNEL OFFICER Title S Title

Name BALICKI, LINDA J HARRISON, ROBERT B Name 611 OLIVE STREET Address 151 WEST 34TH STREET, 13TH Address

FLOOR City-State-Zip: ST. LOUIS MO 63101 NEW YORK NY 10001

Title **PCIO**

Title AS Name LEWARK, LARRY Name

O'BRYAN, STEPHEN J Address 5986 STATE BRIDGE ROAD Address 7 WEST SEVENTH ST.

City-State-Zip: DULUTH GA 30097 CINCINNATI OH 45202 City-State-Zip:

Title SVP

Title SVP Name MANOUGIAN, MIKE GLANCZ, FAYE Name

Address 5985 STATE BRIDGE ROAD Address 5985 STATE BRIDGE ROAD

City-State-Zip: JOHNS CREEK GA 30097 JOHNS CREEK GA 30097 City-State-Zip:

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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: STEPHEN J. O'BRYAN

ASSISTANT SECRETATY

04/17/2014

Officer/Director Detail Continued:

Title VP & TREASURER Title

Name BRIAN, SZAMES Name MAGEE, DONNA A

Address 7 WEST 7TH STREET Address 5985 STATE BRIDGE RD.

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: JOHNS CREEK GA 30097

SVP

Title SVP Title VP

NameLEINBACH, BRIANNameTOMPKINS, WILLIAMAddress5985 STATE BRIDGE RD.Address7 WEST 7TH STREET

City-State-Zip: JOHNS CREEK GA 30097 City-State-Zip: CINCINNATI OH 45202

Title VP Title V

NameHOGUET, KARENNameMAYS, BRADLEY R.Address7 WEST 7TH STREETAddress7 WEST 7TH STREETCity-State-Zip:CINCINNATI OH 45202City-State-Zip:CINCINNATI OH 45202

Title VP Title VP

Name TIROCKE, JOE Name GOERTEMOELLER, CARL L

Address 5985 STATE BRIDGE RD. Address 7 WEST 7TH STREET

City-State-Zip: JOHNS CREEK GA 30097 City-State-Zip: CINCINNATI OH 45202

Title VP Title ASSISTANT TREASURER

NameSTEINES, ANN MUNSONNameLUCAS, STEVEN G.Address7 WEST 7TH STREETAddress7 WEST 7TH STREETCity-State-Zip:CINCINNATI OH 45202City-State-Zip:CINCINNATI OH 45202

Title ASSITANT TREASURER Title ASSISTANT SECRETARY

Name STORER, SUSAN P Name WEBB, GARY A

Address 7 WEST 7TH STREET Address 7 WEST 7TH STREET

City-State-Zip: CINCINNATI OH 45202