2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 30, 2006 8:00 am Secretary of State

01-30-2006 90073 039 ***158 74

DOCUMENT # 483920 1. Entity Name THE CHILDRENS' PLACE, INC.							01-30-2006	900/3 0	39 ***15	8.75
Principal Place 7900 40TH A BRADENTON	AVE W	Mailing Address 7900 40TH AVE W BRADENTON, FL 34209								
Principal Place of Business				· · · · · · · · · · · · · · · · · · ·						
Suite, Apt. #, etc.		Suite, Apt. #, etc.								88111 ISBN
City & State		City & State			012720		Chg-P	CRZEO	34 (11/05)	plied For
				59-1631882 Not Applicable						
Zip	Country	Zip	ry	5. Certifi	cate of	Status Desired		8.75 Add ee Required	itional	
	6. Name and Address of Current	Registered Agent		Name C	7. Name	and Ad	dress of New R	egistered A	gent	
GERBER, MURRAY B DR				Small, Diane L.						
6116 11TH AVENUE WEST BRADENTON, FL 34209				Street Address (P.O. Box Number is Not Acceptable)						
				2804 GTBSt. W.						
				City Bradenton FL Zip Code						09
8. The above name entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
1010										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agniture required when renstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing										
10.	OFFICERS AND		11.				ANGES TO OFF			
TITLE NAME	GERBER, MURRAY	☐ Delete	TITLE NAME		President Gerber Le	ruri Dis	eur rieur (di	- Dogge	Landrage	Addition
STREET ADDRESS	6116 11TH AVE. WEST				Gerber Le	ve. 1	<i>λ</i>).	a		
CITY-ST-ZIP	BRADENTON, FL	₽ Delete	TITLE	ST-ZIP [V. Presider	_	L <u>3420</u>	7	□ Change	Addition
NAME	GERBER, LOIS M	E Delete	NAME	١.	Hedarock	_	san		La Change	
STREET AODRESS CITY-ST-ZIP	6116 11TH AVE. WEST BRADENTON, FL			ET ADDRESS -ST-ZIP	7918 30H	Au	e. E. 342	ne		ĺ
TITLE	BIOADENTON, TE	☐ Delete	TITLE		ecretary	77		708	☐ Change	Addition
NAME			NAME	: k	ice ll sonz	വവ				
STREET ADDRESS CITY-ST-ZIP				et address -St-Zip	2804 67th Bradento	Ω	FL 342	209		
TITLE		☐ Delete	TITLE			• • •			☐ Change	Addition
NAME STREET ADDRESS			NAME STREE	E Et address						
CITY-ST-ZIP				-ST-ZIP						
TITLE		☐ Delete	TITLE						☐ Change	Addition
NAME STREET ADDRESS			NAME STREE	ET ADDRESS						
CITY-ST-ZIP			СПУ-	-ST-ZIP						
TITLE NAME		Delete	TITLE						Change	Addition :
STREET ADDRESS				ET ADDRESS						
CITY ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the e					-1-1101			£	:E. at 0	
12. Thereby	certify that the information supplied wi	in inis tiling does not qualify fo	r the exe	emptions co	ntaineo in Unapte	r <u>1</u> 119, F	iorida Statutes. I	iuriner cert	ny matine m	normation

12. Thereby Certify that the Information supplies will this laing does not quality for the exemptions contained in Chapter 113, include Certify that the information supplies will the information supplies will the information that the supplies that the supplies that the supplies that the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attach precit with an address, witball other ke empowered.

SIGNATURE: Alan Olanell

1/26/06

<u> 141-792-7638</u>