

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

pg 1 of 2

DOCUMENT # 687783 (1)
1. Corporation Name
MARSHALLS DEPARTMENT STORE OF SARASOTA, FL., INC



Principal Place of Business
200 BRICKSTONE SQ.
C/O TAX DEPT.
ANDOVER MA 01810

Mailing Address
200 BRICKSTONE SQ.
C/O TAX DEPT.
ANDOVER MA 01810

3. Date Incorporated or Qualified 09/16/1980
3a. Date of Last Report 04/26/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	04-2709887	Not Applicable
22 ATTN: CORP TAX DEPT RT 1E	27 ATTN: CORP TAX DEPT RT 1E	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 770 COCHITUATE ROAD	28 770 COCHITUATE ROAD	6. Election Campaign Financing	\$5.00 May Be Added to Fees
24 FRAMINGHAM, MA 01701	29 FRAMINGHAM, MA 01701	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25 Zip	30 Zip		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GOLDSTEIN, STANLEY		1.2 NAME	SEE ATTACHED LIST	
STREET ADDRESS	ONE THEALL RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	RYE NY		1.4 CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROSSI, JERRY		2.2 NAME		
STREET ADDRESS	200 BRICKSTONE SQ.		2.3 STREET ADDRESS		
CITY-ST-ZIP	ANDOVER MA		2.4 CITY-ST-ZIP		
TITLE	VPS	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AMBRO, J. G		3.2 NAME		
STREET ADDRESS	200 BRICKSTONE SQ.		3.3 STREET ADDRESS		
CITY-ST-ZIP	ANDOVER MA		3.4 CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COHEN, IRWIN F		4.2 NAME		
STREET ADDRESS	200 BRICKSTONE SQ.		4.3 STREET ADDRESS		
CITY-ST-ZIP	ANDOVER MA		4.4 CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FREIDBERG, WARREN		5.2 NAME		
STREET ADDRESS	200 BRICKSTONE SQUARE		5.3 STREET ADDRESS		
CITY-ST-ZIP	ANDONVER MA 01810		5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALFRED APPEL

VICE PRESIDENT

APR 15 1996

Daytime Phone

CR2E034 (12/95)

2 of 2

MARSHALLS OF ROSEVILLE, MINN., INC.
MARSHALLS OF RICHFIELD, MN., INC.
MARSHALLS INC. AND ALL SUBSIDIARIES
OFFICERS & DIRECTORS
MARCH 14, 1996

PRESIDENT	RICHARD LESSER
VICE PRESIDENT	ALFRED APPEL
VICE PRESIDENT	DONALD CAMPBELL
VICE PRESIDENT	DAVID WEINER
VICE PRESIDENT	IRVING RITZ
TREASURER	STEVEN R. WISHNER
ASSISTANT TREASURER \	MARY B. REYNOLDS
ASSISTANT SECRETARY	
SECRETARY	JAY H. MELTZER
ASSISTANT SECRETARY	KEVIN FOX
ASSISTANT SECRETARY	ANN MCCAULEY
CHAIRMAN BOARD OF DIRECTORS	BERNARD CAMMARATA
DIRECTOR	DONALD CAMPBELL
DIRECTOR	RICHARD LESSER
BUSINESS ADDRESS	ANNUAL MEETING
(FOR ALL OF THE ABOVE):	FIRST TUESDAY IN JUNE
ATTN: CORP. TAX DEPT.	TERM OF OFFICE FOR
770 COCHITUATE ROAD	ALL OF THE ABOVE:
FRAMINGHAM, MA 01701	MARCH 14, 1996 - JUNE 4, 1996