

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005860

FILED
Apr 21, 2010
Secretary of State

Entity Name: MACY'S CORPORATE SERVICES, INC.

Current Principal Place of Business:

7 WEST SEVENTH STREET
CINCINNATI, OH 45202

New Principal Place of Business:

Current Mailing Address:

7 WEST SEVENTH STREET
CINCINNATI, OH 45202

New Mailing Address:

FEI Number: 20-0307941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: BRODERICK, DENNIS J
Address: 7 WEST SEVENTH STREET
City-St-Zip: CINCINNATI, OH 45202

Title: VP
Name: HOGUET, KAREN M
Address: 7 WEST SEVENTH STREET
City-St-Zip: CINCINNATI, OH 45202

Title: VPT
Name: SZAMES, BRIAN M
Address: 7 WEST SEVENTH STREET
City-St-Zip: CINCINNATI, OH 45202

Title: AS
Name: O'BRYAN, STEPHEN J
Address: 7 WEST SEVENTH STREET
City-St-Zip: CINCINNATI, OH 45202

Title: S
Name: BALICKI, LINDA J
Address: 611 OLIVE STREET
City-St-Zip: ST. LOUIS, MO 63101

Title: D
Name: BELSKY, JOEL A
Address: 7 WEST 7TH STREET
City-St-Zip: CINCINNATI, OH 45202

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

AS

04/21/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date