

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007567

FILED
Apr 26, 2011
Secretary of State

Entity Name: HDM RETAIL, INC.

Current Principal Place of Business:

1925 EASTCHESTER DRIVE
HIGH POINT, NC 27265 US

New Principal Place of Business:

Current Mailing Address:

1 N. BRENTWOOD BLVD
7TH FLOOR TAX DEPT
SAINT LOUIS, MO 63105 US

New Mailing Address:

FEI Number: 56-1726125 **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

OFFICERS AND DIRECTORS:

Title: PRES
Name: BRADLEY, DAN
Address: 1925 EASTCHESTER DRIVE
City-St-Zip: HIGH POINT, NC 27265 US

Title: VPS
Name: BOTSFORD, JON D
Address: 1 N. BRENTWOOD BLVD
City-St-Zip: SAINT LOUIS, MO 63105 US

Title: AT
Name: ALSTADT, STEVEN W
Address: 1 N. BRENTWOOD BLVD
City-St-Zip: SAINT LOUIS, MO 63105 US

Title: DIR
Name: SCOZZAFAVA, RALPH
Address: 1 N. BRENTWOOD BLVD
City-St-Zip: SAINT LOUIS, MO 63105 US

Title: DIR
Name: BOTSFORD, JON D
Address: 1 N. BRENTWOOD BLVD
City-St-Zip: SAINT LOUIS, MO 63105 US

Title: DIR
Name: ROLLS, STEVEN G
Address: 1 N. BRENTWOOD BLVD
City-St-Zip: ST. LOUIS, MO 63105 US

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: STEVEN W ALSTADT

AT

04/26/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date