

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004191

FILED  
Feb 13, 2007  
Secretary of State

Entity Name: BELK ADMINISTRATION COMPANY

## Current Principal Place of Business:

2801 WEST TYVOLA RD  
CHARLOTTE, NC 28217

## New Principal Place of Business:

## Current Mailing Address:

2801 WEST TYVOLA RD  
CHARLOTTE, NC 28217

## New Mailing Address:

2801 WEST TYVOLA RD (A408)  
CHARLOTTE, NC 28217

FEI Number: 56-0945905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR, SUITE 4  
WESTON, FL 33331 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: CCEO ( ) Delete  
Name: BELK, THOMAS M JR.  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

Title: P ( ) Delete  
Name: BELK, H.W. MCKAY  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

Title: PCOO ( ) Delete  
Name: BELK, JOHN R  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

Title: EVPS ( ) Delete  
Name: PITTS, RALPH A  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

Title: EVP ( ) Delete  
Name: MARLEY, BRIAN T  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

Title: CFO ( ) Delete  
Name: MARLEY, BRIAN T  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PCMO (X) Change ( ) Addition  
Name: BELK, H.W. MCKAY  
Address: 2801 WEST TYVOLA RD  
City-St-Zip: CHARLOTTE, NC 28217

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RALPH A. PITTS

EVPS

02/13/2007

Electronic Signature of Signing Officer or Director

Date