

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006700

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** SAN ANTONIO RETAIL MERCHANTS ASSOCIATION INCORPORATED

**Current Principal Place of Business:**

1801 BROADWAY  
SAN ANTONIO, TX 78215

**New Principal Place of Business:**

**Current Mailing Address:**

1801 BROADWAY  
SAN ANTONIO, TX 78215

**New Mailing Address:**

FEI Number: 74-0879730

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PCEO  
Name: BENAVIDES, ROBERTO  
Address: 1801 BROADWAY  
City-St-Zip: SAN ANTONIO, TX 78215

Title: VST  
Name: STOLTE, LINDA  
Address: 1801 BROADWAY  
City-St-Zip: SAN ANTONIO, TX 78215

Title: AST  
Name: MULVANY, KIM  
Address: 1801 BROADWAY  
City-St-Zip: SAN ANTONIO, TX 78215

Title: D  
Name: BRADFIELD, JOYCE  
Address: 1801 BROADWAY  
City-St-Zip: SAN ANTONIO, TX 78215

Title: DC  
Name: BRUSENHAN, HARRY  
Address: 1801 BROADWAY  
City-St-Zip: SAN ANTONIO, TX 78215

Title: DVC  
Name: HAEGELIN, TIM  
Address: 1801 BROADWAY  
City-St-Zip: SAN ANTONIO, TX 78215

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA STOLTE

VST

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date