

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000339

FILED
Apr 18, 2011
Secretary of State

Entity Name: BROWN SHOE COMPANY, INC.

Current Principal Place of Business:

8300 MARYLAND AVENUE
ST. LOUIS, MO 63105

New Principal Place of Business:

Current Mailing Address:

8300 MARYLAND AVENUE
ST. LOUIS, MO 63105

New Mailing Address:

FEI Number: 43-0197190 **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: CEO
Name: FROMM, RONALD
Address: 8300 MARYLAND AVENUE
City-St-Zip: ST. LOUIS, MO 63105

Title: P
Name: SULLIVAN, DIANE M
Address: 8300 MARYLAND AVENUE
City-St-Zip: ST. LOUIS, MO 63105

Title: T
Name: LUCAS, THOMAS
Address: 8300 MARYLAND AVENUE
City-St-Zip: ST. LOUIS, MO 63105

Title: AS
Name: BERBERICH, WILLIAM J JR.
Address: 8300 MARYLAND AVENUE
City-St-Zip: ST. LOUIS, MO 63105

Title: VPS
Name: OBERLANDER, MICHAEL I
Address: 8300 MARYLAND AVENUE
City-St-Zip: ST. LOUIS, MO 63105

Title: VP
Name: HOOD, MARK E
Address: 8300 MARYLAND AVENUE
City-St-Zip: ST. LOUIS, MO 63105

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: WILLIAM J. BERBERICH, JR.

AS

04/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date