

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004071

FILED
Aug 25, 2009
Secretary of State

Entity Name: GORDMANS INTERMEDIATE HOLDING CORP.

Current Principal Place of Business:

12100 W CENTER ROAD
OMAHA, NE 68144

New Principal Place of Business:

Current Mailing Address:

12100 W CENTER ROAD
OMAHA, NE 68144

New Mailing Address:

FEI Number: 26-3179938

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOP () Delete
Name: GORDMAN, JEFFREY
Address: 12100 W CENTER ROAD
City-St-Zip: OMAHA, NE 68144

Title: SD () Delete
Name: GORDMAN, JEFFREY
Address: 12100 W CENTER ROAD
City-St-Zip: OMAHA, NE 68144

Title: VPT () Delete
Name: JAMES, MICHAEL D
Address: 12100 W CENTER ROAD
City-St-Zip: OMAHA, NE 68144

Title: CFO () Delete
Name: JAMES, MICHAEL D
Address: 12100 W CENTER ROAD
City-St-Zip: OMAHA, NE 68144

Title: VPAS () Delete
Name: MCCONVERY, MICHAEL J
Address: 5200 TOWN CENTER CIRCLE, STE 600
City-St-Zip: BOCA RATON, FL 33486

Title: VPAS () Delete
Name: HAJDUCH, MARK
Address: 5200 TOWN CENTER CIRCLE, STE 600
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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: MICHAEL D. JAMES

CFO

08/25/2009

Electronic Signature of Signing Officer or Director

Date