

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90052 018 ***150.00

DOCUMENT # F99000006391

1. Entity Name
ANNTAYLOR RETAIL, INC.



Principal Place of Business
476 WHEELERS FARMS ROAD
TAX DEPARTMENT
MILFORD, CT 04640

Mailing Address
476 WHEELERS FARMS ROAD
TAX DEPARTMENT
MILFORD, CT 04640

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03112008 Chg-P CR2E034 (12/06)

4. FEI Number
06-1415434

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
KRILL, KAY
7 TIMES SQUARE 15TH FL
NEW YORK, NY 10036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
GCS
EISENBERG, BARBARA K
7 TIMES SQ 15TH FL
NEW YORK, NY 10036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
SMITH, JAMES M
7 TIMES SQ 15TH FL
NEW YORK, NY 10026 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/D
MICHAEL J. NICHOLSON
7 TIMES SQUARE 15TH FLOOR
NEW YORK, NY 10036 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
POKORA, STANLEY
476 WHEELERS FARMS RD
MILFORD, CT 06460 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
SAMIR PATEL
476 WHEELERS FARMS ROAD
MILFORD, CT 06461 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
REIS, DOMINICK J
476 WHEELERS FARMS RD
MILFORD, CT 06460 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SAMIR PATEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/08
Date

203-283-8500
Daytime Phone #