

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 03, 2007  
Secretary of State**

DOCUMENT# L05000000050

Entity Name: CATHERINES #5069, LLC

**Current Principal Place of Business:**

3750 STATE RD  
BENSALEM, P1 19020

**New Principal Place of Business:**

**Current Mailing Address:**

3750 STATE ROAD  
BSC TAX DEPT  
BENSALEM, PA 19020

**New Mailing Address:**

FEI Number: 51-0297099      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM      ( ) Delete  
Name: CATHERINES, INC.,  
Address: 450 WINKS LANE  
City-St-Zip: BENSALEM, P1 19020

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

Title: MGR      ( ) Delete  
Name: SPECTER, ERIC  
Address: 3750 STATE RD  
City-St-Zip: BENSALEM, PA 19020

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

Title: MGR      ( ) Delete  
Name: GLUECK, NEAL  
Address: 3750 STATE RD  
City-St-Zip: BENSALEM, PA 19020

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

Title: MGR      ( ) Delete  
Name: SULLIVAN, JOHN  
Address: 3750 STATE RD  
City-St-Zip: BENSALEM, PA 19020

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NEAL GLUECK

MGR

05/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date