

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000006340**

1. Entity Name

DAVID'S BRIDAL OF TAMPA, INC.**FILED**
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90012 022 ***150.00

Principal Place of Business

44 W. LANCASTER AVE.
ARDMORE PA 19003

Mailing Address

44 W. LANCASTER AVE.
ARDMORE PA 19003

2. Principal Place of Business

1001 WASHINGTON STREET

Suite, Apt. #, etc.

3. Mailing Address

1001 WASHINGTON STREET

Suite, Apt. #, etc.

City & State

CONSHOHOCKEN PA

City & State

CONSHOHOCKEN PA

Zip

19428

Country

Zip

19428

Country

4. FEI Number

23-3031487

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **ER;BAUM, STEVEN**
STREET ADDRESS **44 W. LANCASTER AVE.**
CITY-ST-ZIP **ARDMORE PA 19003**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **SEE ATTACHED**
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Martin Doerr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARTIN DOERR**4/9/01**

Date

Daytime Phone #

CR2E034 (10/00)

Attachment
D#P00000006340
BD035930

OFFICERS

| | | |
|---------------------|---------------------|---------------------------------------|
| Jan R. Kniffen | President | 611 Olive Street, St. Louis, MO 63101 |
| Richard A. Brickson | VP & Secretary | 611 Olive Street, St. Louis, MO 63101 |
| Martin M. Doerr | Vice President | 611 Olive Street, St. Louis, MO 63101 |
| John A. Sztukowski | Treasurer | 611 Olive Street, St. Louis, MO 63101 |
| Linda J. Balicki | Assistant Secretary | 611 Olive Street, St. Louis, MO 63101 |
| Steven M. Weinstein | Assistant Secretary | 611 Olive Street, St. Louis, MO 63101 |

DIRECTORS

| | |
|----------------|---------------------------------------|
| Jan R. Kniffen | 611 Olive Street, St. Louis, MO 63101 |
|----------------|---------------------------------------|