2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142874

City-St-Zip:

BENSALEM, PA 19020

Entity Name: LANE BRYANT #6420, INC.

FILED May 07, 2007 Secretary of State

| , | | ····· | | | |
|---|--|--|---|---|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| 3750 STATE ROAD BENSALEM, PA 19020 | | | | 2271 TOWN CENTER AVENUE #103 MELBOURNE, FL 32940 | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 3750 STA BSC TAX BENSALE | | | | | |
| FEI Number | : 73-1686628 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address | Name and Address of New Registered Agent: | |
| | SSEE, FL 323 | | ourpose of changing its registers | ed office or registered agent, or both, | |
| | e of Florida. | submits this statement for the p | ourpose of changing its registere | or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| | | 93(2)(b), F.S., the corporation did no | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | DVP (GLUECK, NEA 3750 STATE R BENSALEM, P | rD. | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DVP (SULLIVAN, JO 450 WINKS LN BENSALEM, P | 1 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | P (SPECTER, ER 450 WINKS LA | | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: NEAL GLUECK DVP 05/07/2007