

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90054 020 ***150.00

DOCUMENT # P08428

1. Entity Name
BROWN GROUP RETAIL, INC.



Principal Place of Business
**8300 MARYLAND AVE
ST. LOUIS, MO 63105 US**

Mailing Address
**P.O. BOX 360
ST. LOUIS, MO 63166 US**

54029231



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04042004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number

25-1323027

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME FROMM, RONALD A
STREET ADDRESS 8300 MARYLAND AVENUE
CITY-ST-ZIP ST. LOUIS, MO

TITLE VP ☐ Delete
NAME SCHUMACHER, RICHARD C
STREET ADDRESS 8300 MARYLAND AVE
CITY-ST-ZIP SAINT LOUIS, MO 63105

TITLE VPS ☐ Delete
NAME OBERLANDER, MICHAEL I
STREET ADDRESS 8300 MARYLAND AVENUE
CITY-ST-ZIP ST LOUIS, MO 63166

TITLE T ☐ Delete
NAME ROSEN, ANDREW
STREET ADDRESS 8300 MARYLAND AVENUE
CITY-ST-ZIP ST. LOUIS, MO

TITLE AS ☐ Delete
NAME BERBERICH, WILLIAM J.
STREET ADDRESS 8300 MARYLAND AVENUE
CITY-ST-ZIP ST LOUIS, MO

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO/DIRECTOR ☒ Change ☐ Addition
NAME FROMM, RONALD A.
STREET ADDRESS 8300 MARYLAND AVE.
CITY-ST-ZIP ST. LOUIS, MO 63105

TITLE PRESIDENT ☐ Change ☒ Addition
NAME SULLIVAN, DIANE
STREET ADDRESS 8300 MARYLAND AVE.
CITY-ST-ZIP ST. LOUIS, MO 63105

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME STADLER, JR., ROBERT E.
STREET ADDRESS 8300 MARYLAND AVE.
CITY-ST-ZIP ST. LOUIS, MO 63105

TITLE DIRECTOR ☐ Change ☒ Addition
NAME BOWER, JOSEPH L.
STREET ADDRESS 8300 MARYLAND AVE.
CITY-ST-ZIP ST. LOUIS, MO 63105

TITLE DIRECTOR ☐ Change ☒ Addition
NAME RITTER, JERRY E.
STREET ADDRESS 8300 MARYLAND AVE.
CITY-ST-ZIP ST. LOUIS, MO 63105

TITLE DIRECTOR ☐ Change ☒ Addition
NAME LIDDY, RICHARD A.
STREET ADDRESS 8300 MARYLAND AVE.
CITY-ST-ZIP ST. LOUIS, MO 63105

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/04 (314) 854-4067

Date

Daytime Phone #