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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P13975 (8)

1. Corporation Name
ONE PRICE CLOTHING STORES, INC.

Principal Place of Business

1875 E. MAIN STREET
HWY. 290, COMMERCE PARK
DUNCAN SC 29334
US

Mailing Address

290 COMMERCE PARK HWY 290
PO BOX 2487
SPARTANBURG SC 29304-2487



3. Date Incorporated or Qualified
04/09/1987

3a. Date of Last Report
05/01/1996

4. FEI Number
57-0779028

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

26 PO Box 2487

Suite, Apt. #, etc.

27 City & State

28 SPARTANBURG SC

29 Zip

25 Country

29 29304-2487 30

Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME JACOBS, HENRY D., JR.
STREET ADDRESS 1875 E. MAIN STREET
CITY-ST-ZIP DUNCAN SC ☐ DELETE

TITLE SD
NAME WATERS, RAYMOND S.
STREET ADDRESS 1875 E. MAIN STREET
CITY-ST-ZIP DUNCAN SC ☐ DELETE

TITLE D
NAME MOSELEY, CHARLES D.
STREET ADDRESS 9 N. PARKWAY SQUARE
CITY-ST-ZIP ATLANTA GA ☐ DELETE

TITLE D
NAME BELLET, DAVID F.
STREET ADDRESS 225 BROADWAY
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE V
NAME FELDMAN, STEPHEN A
STREET ADDRESS 1875 E. MAIN STREET
CITY-ST-ZIP DUNCAN SC ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

T
C BURT DUREN
1875 E MAIN ST
DUNCAN SC 29334

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
C BURT DUREN 4-10-97 864 433 8888

Date

Daytime Phone #

0010706

CR2E034 (9/96)