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Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90095 010 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P13975

1. Corporation Name

ONE PRICE CLOTHING STORES, INC.

Principal Place of Business

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

Mailing Address

P.O. BOX 2487
PO BOX 2487-
SPARTANBURG SC 29304-2487
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1987

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

22
City & State

27
City & State

23
Zip Country

28
Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	LARRY I KELLEY	
STREET ADDRESS	1875 E. MAIN STREET	
CITY-ST-ZIP	DUNCAN SC 29334	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GIBSON, GRANT H.	
STREET ADDRESS	1875 E. MAIN STREET	
CITY-ST-ZIP	DUNCAN SC	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MOSELEY, CHARLES D.	
STREET ADDRESS	9 N. PARKWAY SQUARE	
CITY-ST-ZIP	ATLANTA GA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LAURIE M SHAHON	
STREET ADDRESS	825 THIRD AVE 40TH FL	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	FELDMAN, STEPHEN A	
STREET ADDRESS	1875 E. MAIN STREET	
CITY-ST-ZIP	DUNCAN SC	
TITLE	T	<input type="checkbox"/> DELETE
NAME	DUREN, BURT S.	
STREET ADDRESS	1875 E. MAIN STREET	
CITY-ST-ZIP	DUNCAN SC	

1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	V/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	181 BERKELEY PLACE, SUITE 4	
4.3 STREET ADDRESS	BROOKLYN NY 11217	
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	C. BURT DUREN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED TREASURER 2-26-99

864 486-6354

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

One Price Clothing Stores, Inc.
Document # P13975
Profit Corporation Annual Report 1999

271577-90095-10
P13975

OFFICERS AND DIRECTORS

Title P/D
Name Larry I. Kelley
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334

Title D
Name Warren Flick
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334

Title V/S
Name Grant H. Gibson
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334

Title D
Name Laurie M. Shahon
Street Address 181 Berkeley Place, Suite 4
City-St-Zip Brooklyn NY 11217

Title T
Name C. Burt Duren
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334

Title D
Name Malcolm L. Sherman
Street Address 98 Spit Brook Road, Ste 102
City-St-Zip Nashua NH 03062

Title AS
Name Diane G. O'Bryant
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334

Title D
Name James M. Shoemaker, Jr.
Street Address 44 East Camperdown Way
City-St-Zip Greenville SC 29601

Title C/D
Name Leonard Snyder
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334

Title D
Name Raymond S. Waters
Street Address 1875 E. Main St.
City-St-Zip Duncan SC 29334