2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P15086

1. Entity Name
SWANK FACTORY OUTLET STORE, INC.

Principal Place of Business	Mailing Address
656 JOSEPH WARNER BLVD TAUNTON, MA 02780	656 JOSEPH WARNER BLVD TAUNTON, MA 02780

DO NOT WRITE IN THIS SPACE

01042007 No Chg-P CR2E034 (11/05)

4. FEI Number
04-1886990
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 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
NAME	TULIN, JOHN
STREET ADDRESS	90 PARK AVENUE
CITY-ST-ZIP	NEW YORK, NY
TITLE	SVTS
NAME	KASSNER, JEROLD R
STREET ADDRESS	656 JOSEPH WARNER BLVD
CITY-ST-ZIP	TAUNTON, MA 02780
TITLE	VP
NAME	GATELY, III, ARTHUR T
STREET ADDRESS	656 JOSEPH WARNER BLVD
CITY-ST-ZIP	TAUNTON, MA 02780
TITLE	D
NAME	LUFT, ERIC
STREET ADDRESS	90 PARK AVE
CITY-ST-ZIP	NEW YORK, NY
TITLE	D
NAME	TULIN, JAMES E
STREET ADDRESS	8800 N GAINEY CTR DT, 2ND FL, STE 278
CITY-ST-ZIP	SCOTTSDALE, AZ 85258
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000600203
01/25/07-80058-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ Jerold R. Kassner 1/10/07 508-822-2527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #