

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20089

FILED
Apr 24, 2009
Secretary of State

Entity Name: THE CHILDREN'S PLACE RETAIL STORES, INC.

Current Principal Place of Business:

915 SECAUCUS ROAD
SECAUCUS, NJ 07094 US

New Principal Place of Business:

Current Mailing Address:

915 SECAUCUS ROAD
SECAUCUS, NJ 07094 US

New Mailing Address:

FEI Number: 31-1241495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: CROVITZ, CHARLES
Address: 915 SECAUCUS ROAD
City-St-Zip: SECAUCUS, NJ 070942409

Title: D () Delete
Name: DABAH, EZRA
Address: 915 SECAUCUS ROAD
City-St-Zip: SECAUCUS, NJ 070942409 US

Title: D () Delete
Name: STANLEY, SILVERSTEIN
Address: C/O NINA FOOTWEAR CORP, 730 AVE 8TH FL
City-St-Zip: NY, NY 10019

Title: EVPA () Delete
Name: RILEY, SUSAN
Address: 915 SECAUCUS RD
City-St-Zip: SECAUCUS, NJ 07094

Title: D () Delete
Name: FISCH, ROBERT
Address: 915 SECAUCUS RD
City-St-Zip: SECAUCUS, NJ 07094

Title: D () Delete
Name: ELVEY, MALCOLM
Address: 915 SECAUCUS RD
City-St-Zip: SECAUCUS, NJ 07094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: CROVITZ, CHARLES
Address: 915 SECAUCUS ROAD
City-St-Zip: SECAUCUS, NJ 07094 US

Title: D (X) Change () Addition
Name: DABAH, EZRA
Address: 915 SECAUCUS ROAD
City-St-Zip: SECAUCUS, NJ 07094 US

Title: D (X) Change () Addition
Name: STANLEY, SILVERSTEIN
Address: 915 SECAUCUS ROAD
City-St-Zip: SECAUCUS, NJ 07094 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ADRIENNE URBAN

D

04/24/2009

Electronic Signature of Signing Officer or Director

Date