FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1998

(8)

DOCUMENT # BURDINE'S MAIN STORE REAL ESTATE, INC.

FILED Feb 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					21011 2121) 01011 41411 212 11 1001	
*FEDERATED DEPARTMENT STORES, INC. *FEDERATED DEPARTMEN						
7 WEST SEVENTH STREET CINCINNATI OH 45202		7 WEST SEVENTH STREET CINCINNATI OH 45202		DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE	
Onomination visite				3. Date Incorporated or Qualified		
				07/22/1988		
	Place of Business	2a. Mailing Address	1.0	4. FEI Number	Applied For	
21		26 c/o Federate			Not Applicable	
Suite, Apt.	#, etc.		ervices, In	C. 5. Certificate of Status Desired	\$8.75 Additional	
22		7 West Seven	th Street		Fee Required	
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28 Cincinnati,	Ohio	Trust Fund Contribution	Added to Fees	
Zip	Country	^{Zip} 45202 3	Country	8. This corporation owes or has paid the		
24	25] 9. Name and Address of Current		USA USA	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes X No	
CT	CORPORATION SYSTEM	nogistored Agent	81 Name	It. Haire and Address of New Negister	en Vâpiir	
1200 S. PINE ISLAND ROAD						
PLANTATION FL 33324			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
			83			
			84 City	F	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						
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		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	DELETE	1,1 TITLE	AS	☐ Change ☒ Addition	
NAME	Broderick, Dennis, J.		1,2 NAME	Stewart, Gwyneth, G.		
STREET ADDRESS	7 WEST SEVENTH STREET		1.3 STREET ADDRESS	7 West Seventh Street		
CITY-ST-ZIP	CINCINNATI OH		1.4 CITY-ST-ZIP	Cincinnati, OH		
TITLE	V	DELETE	2.1 TITLE	AS	Change Addition	
NAME	SEPPELT, ROBERT C.		2.2 NAME	Zavatsky, Kathleen H.		
STREET ADDRESS	7 WEST SEVENTH STREET		2.3 STREET ADDRESS	7 West Seventh Street	ĺ	
CITY-ST-ZIP	CINCINNATI OH		2.4 CITY-ST-ZIP	Cincinnati, OH		
TITLE	V	DELETE	3.1 TITLE	AS	Change X Addition	
NAME	NAY, GARY		3.2 NAME	Ziermaier, Klaus M.	-	
STREET ADDRESS	7 WEST SEVENTH STREET		3.3 STREET ADDRESS	7 West Seventh Street		
CITY-ST-ZIP	CINCINNATI OH			Cincinnati. OH		
TITLE	VDS	DELETE	4.1 TOTLE	VALIVATE INDEX 1 VII	Change Addition	
NAME	SIMS, JOHN R.	_	4. 2 NAME		-	
STREET ADDRESS	7 WEST 7TH ST.		4.3 STREET ADDRESS			
CITY-ST-ZIP	CINCINNATI OH		4.4 CITY-ST-ZIP			
TITLE	VI	DELETE	5.1 TITLE		Change Addition	
NAME	HOGUET, KAREN M		5.2 NAME			
STREET ADDRESS	7 West Seventh Street		5.3 STREET ADDRESS			
CITY-ST-ZIP	CINCINNATI OH		5.4 CITY - ST - ZIP			
TITLE	AS	DELETE	6.1 TITLE		Change Addition	
NAME	COX, JACK B.		6.2 NAME			
STREET ADDRESS	7 WEST SEVENTH STREET		6.3 STREET ADDRESS		ļ	
CITY-ST-ZIP	CINCINNATI OH		6.4 CITY - ST - ZIP			
	Tax 12 . 11 . 1 . 1 . 11			1 0 11 - 440 07(0\1) Ct 11 01-11 1- 14 -15		

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 of 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 a stachment with an address.

SIGNATURE:

Jack B. Cox, Asst. Secy.

2/16/98 513-579-7311