

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V16025

FILED
Apr 19, 2006
Secretary of State

Entity Name: STEIN MART, INC.

Current Principal Place of Business:

2600 RIVER PLACE BLVD.
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

1200 RIVER PLACE BLVD.
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 64-0466198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: CD () Delete
Name: STEIN, JAY,
Address: 1200 RIVERPLACE BLVD
City-St-Zip: JACKSONVILLE, FL

Title: VCD () Delete
Name: WILLIAMS, JR., JOHN, H.
Address: 1200 RIVERPLACE BLVD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: WINSTON, JAMES H.,
Address: 645 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: LEGLER, MITCHELL W.,
Address: 200 LAURA STREET
City-St-Zip: JACKSONVILLE, FL 322010240

Title: PD () Delete
Name: FISHER, MICHAEL
Address: 1200 RIVERPLACE BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Delete
Name: ROBERSON, JR., CLAYTON E TREASUR
Address: 1200 RIVERPLACE BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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 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: CLAYTON E. ROBERSON, JR.

TREA

04/19/2006

Electronic Signature of Signing Officer or Director

Date