

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000000050

**Entity Name:** CATHERINES #5069, LLC

**Current Principal Place of Business:**

3750 STATE ROAD  
BENSALEM, 19020

**Current Mailing Address:**

3750 STATE ROAD  
BSC TAX DEPT  
BENSALEM, PA 19020

**FEI Number:** 51-0297099

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name CATHERINES, INC.  
Address 3750 STATE ROAD  
City-State-Zip: BENSALEM 19020

Title MGR  
Name DAWSON, WILLIAM  
Address 3750 STATE ROAD  
City-State-Zip: BENSALEM PA 19020

Title MGR  
Name LEE, JOHN  
Address 3750 STATE ROAD  
City-State-Zip: BENSALEM PA 19020

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN LEE

**MANAGER**

**04/17/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date