

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003288

Entity Name: TUMI STORES, INC.**Current Principal Place of Business:**499 THORNALL STREET, 10TH FLOOR
EDISON, NJ 08837**Current Mailing Address:**499 THORNALL STREET, 10TH FLOOR
EDISON, NJ 08837 US**FEI Number:** 22-3788542**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	PRESIDENT
Name	DAWSON, ANDREW
Address	499 THORNALL STREET, 10TH FLOOR
City-State-Zip:	EDISON NJ 08837

Title	DIRECTOR
Name	GENDREAU, KYLE
Address	499 THORNALL STREET, 10TH FLOOR
City-State-Zip:	EDISON NJ 08837

Title	SECRETARY
Name	LIVINGSTON, JOHN
Address	499 THORNALL STREET, 10TH FLOOR
City-State-Zip:	EDISON NJ 08837

Title	ASSISTANT TREASURER
Name	WALDEN, DON
Address	499 THORNALL STREET, 10TH FLOOR
City-State-Zip:	EDISON NJ 08837

Title	TREASURER, DIRECTOR
Name	TALEGHANI, REZA
Address	499 THORNALL STREET, 10TH FLOOR
City-State-Zip:	EDISON NJ 08837

Title	ASSISTANT SECRETARY
Name	GERDONEY, MICHELLE
Address	575 WEST STREET
City-State-Zip:	MANSFIELD MA 02048

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 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 all other like empowered.

SIGNATURE: JOHN LIVINGSTON**SECRETARY****02/06/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date