

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000608

Entity Name: MACY'S CREDIT AND CUSTOMER SERVICES, INC.**Current Principal Place of Business:**4705 DUKE DRIVE
MASON, OH 45040**Current Mailing Address:**C/O MACY'S CORPORATE SERVICES, INC
7 WEST SEVENTH STREET
CINCINNATI, OH 45202 US**FEI Number:** 31-1397510**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**Officer/Director Detail :**

Title	D
Name	BELSKY, JOEL
Address	7 WEST SEVENTH ST.
City-State-Zip:	CINCINNATI OH 45202

Title	CHIEF HUMAN RESOURCES OFFICER
Name	ALLEN, WILLIAM S
Address	151 W 34TH STREET
City-State-Zip:	NEW YORK NY 10001

Title	AS
Name	O'BRYAN, STEPHEN J
Address	7 W 7TH STREET
City-State-Zip:	CINCINNATI OH

Title	EVP
Name	HANSON, AMY L
Address	7 WEST 7TH STREET
City-State-Zip:	CINCINNATI OH 45202

Title	DVP
Name	BRODERICK, DENNIS J
Address	7 WEST SEVENTH ST.
City-State-Zip:	CINCINNATI OH 45202

Title	S
Name	BALICKI, LINDA J
Address	611 OLIVE STREE
City-State-Zip:	ST. LOUIS MO 63101

Title	VPT
Name	SZAMES, BRIAN M
Address	7 WEST 7TH STREET
City-State-Zip:	CINCINNATI OH 45202

Title	ASST. SECRETARY
Name	STORER, SUSAN P
Address	7 WEST 7TH STREET
City-State-Zip:	CINCINNATI OH 45202

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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: STEPHEN J. O'BRYAN**ASSISTANT SECRETARY** 04/06/2015_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP
Name HOGUET, KAREN M.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title SENIOR VICE PRESIDENT
Name FAULK, DAVID L.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title SENIOR VICE PRESIDENT
Name ALLEN, SUSAN C.
Address 9111 DUKE BLVD.
City-State-Zip: MASON OH 45040

Title VP
Name STEINES, ANN MUNSON
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title VP
Name TOMPKINS, WILLIAM
Address 151 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title ASSISTANT SECRETARY
Name KELLY, CHRISTOPHER M.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title ASSISTANT SECRETARY
Name WEBB, GARY A.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title PRESIDENT
Name GATIO, MICHAEL J.
Address 9111 DUKE BLVD.
City-State-Zip: MASON OH 45040

Title SENIOR VICE PRESIDENT
Name HUXEL, TERESA
Address 9111 DUKE BLVD.
City-State-Zip: MASON OH 45040

Title VP
Name GOERTEMOELLER, CARL L.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title VP
Name MAYS, BRADLEY R.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title ASSISTANT TREASURER
Name LUCAS, STEVEN G.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title ASSISTANT SECRETARY
Name FURLONG, KATHLEEN A.
Address 7 WEST 7TH STREET
City-State-Zip: CINCINNATI OH 45202

Title ASSISTANT SECRETARY
Name CICLET, DONNA R.
Address 9111 DUKE BLVD.
City-State-Zip: MASON OH 45040