

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845456

FILED
Apr 01, 2011
Secretary of State

Entity Name: HALLMARK RETAIL, INC.

Current Principal Place of Business:

2501 MCGEE TRAFFICWAY
TAX 407
KANSAS CITY, MO 64108 US

New Principal Place of Business:

2501 MCGEE TRAFFICWAY
KANSAS CITY, MO 64108 US

Current Mailing Address:

P O BOX 419479 TAX 407
KANSAS CITY, MO 641416479 US

New Mailing Address:

P O BOX 419479
TAX 407
KANSAS CITY, MO 641416479 US

FEI Number: 43-1188220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: S
Name: YOUNG, VICKIE
Address: 804 NW 40TH TERRACE
City-St-Zip: KANSAS CITY, MO 64116

Title: T
Name: MCMILLEN, JEFF
Address: 657 BUTTERNUT COURT
City-St-Zip: LIBERTY, MO 64068

Title: AS
Name: HARTLEY, KEVIN M
Address: 16 F STREET
City-St-Zip: LAKE LOTAWANA, MO 64086

Title: V
Name: GRECIAN, JERRY
Address: 13819 WOODWARD
City-St-Zip: OVERLAND PARK, KS 66223

Title: PD
Name: GUIBOR, BILL
Address: 204 WEST 51ST TERRAACE
City-St-Zip: KANSAS CITY, MO 64112

Title: D
Name: DELEO, FRANK
Address: 4790 OAK STREET
City-St-Zip: KANSAS CITY, MO 64112

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: KEVIN M HARTLEY

AS

04/01/2011

Electronic Signature of Signing Officer or Director

_____ Date