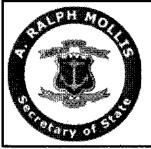
Fee: \$50.00



State of Rhode Island and Providence Plantations Office of the Secretary of State

Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040

LOGOUT

Foreign Business Corporation Annual Report

Filing Period: January 1 - March 1



In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1501(c&d)) is subject to a penalty fee of \$25.00. ANNUAL REPORT YEAR: 2009 1. Corporate ID No. 000116976 2. Name of Corporation Kohl's Department Stores, Inc. 3. Street Address Principal Business Office: No. and Street: N56 W17000 RIDGEWOOD DRIV State: WI Zip: 53051 MENOMONEE FALLS Country: USA City or Town: 4. Business Phone No. 262-703-7000 5. State of Incorporation State: DE

3rief Description of the Character ...

RETAIL DEPARTMENT STORE SERVICES

By 22009 6. Brief Description of the Character of Business Conducted in Rhode Island 7. Names and Addresses of the Officers and Directors: All officers and directors must be listed.

1 1	Title	Individu	ual Name		Address		
Delete		First, Middle	e, Last, Suffix		or Town, State, Zip		
	SECRETARY	RICHARE	RICHARD SCHEPP		13775 NORTH LEGACY HILLS DRIVE MEQUON, WI 53097 USA		
	CFO	WESLEY N	WESLEY MCDONALD		8336 NORTH GREENVALE ROAD FOX POINT, WI 53217 USA		
	Chairman	R. Lawrence Montgomery		6360 North Lake Dr Whitefish Bay, WI 53217 USA			
	CEO	Кеуіп	Kevin Mansell		5370 North Lake Dr. Whitefish Bay, WI 53217 USA		
Select F First Name: Address:	rom Below	Middle Name: City:	regiones en	st Name: Zip:	CC	uffix:	
8. Share	s Authorized ar	nd Issued					
Class of Stock		Series of Stock Par Value		Per Share	Total Authorized Shares <i>Number of</i> <i>Shares</i>	Total Issued and Outstanding Num of Shares	
CWP			\$0.01		200,000.00	99,600.00	
corpo	ration is in the	executed on behalf of hands of a receiver ceiver or trustee.	of the corporati or trustee, this	on by an authoreport must b	orized represe e executed on	entative. If the behalf of the	
Filer's C	contact Information	t ion nailing address and e	mail.)				
Contact		AECKS			A.		
Busines	*************************************	A			1/40 1/A	. .	
No. and	Street: N56 W	17000 RIDGEWOOD	- Sam	e Address a	14 0 2 11 5 305 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	
Ой Т	MENO	MONEE EALLS	State:	WI Zip:	5305	Country: USA	
City or T	A	MONEE FALLS 03-7021 ext:	State.	ZIP.	6	DOUTHEY LAND TO THE STATE OF TH	
Contact		JAECKS@KOHLS.Co	OM			Clear	
Please the filin	nrovide an ema	il address to receive any reason. If no e	an expedited	response from provided, cor	the Corporati respondence	ons Division if from the	
individi	ual or individuo atorv. under p	February, 2009 and signing this instruction of perjury, ecorporation, and t	rument constitu that this instru	ites the affirma ment is that in	ation or ackno dividual's act	owledgement of and deed or	

************	Jaecks
Signa	ture of Authorized Representative of the Corporation
Tax A	Accountant
Title	
nsteu	By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this
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