



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

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02901-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. 108076		2. Name of Corporation C & J CLARK RETAIL, INC.			
3. Street Address Principal Business Office 156 OAK STREET			City NEWTON UPPER FALLS	State MA	Zip 02464
4. Business Phone No. 617-964-1222		5. State of Incorporation PENNSYLVANIA			
6. Brief Description of the Character of Business Conducted in Rhode Island RETAIL SHOE SALES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JAMES SALZANO			Vice President Name MARK BOUCKLEY		
Street Address 156 OAK STREET			Street Address 156 OAK STREET		
City NEWTON UPPER FALLS	State MA	Zip 02464	City NEWTON UPPER FALLS	State MA	Zip 02464
Secretary Name KARLA JARVIS			Treasurer Name MAUREEN GRADY		
Street Address 156 OAK STREET			Street Address 156 OAK STREET		
City NEWTON UPPER FALLS	State MA	Zip 02464	City NEWTON UPPER FALLS	State MA	Zip 02464
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name MELISSA POTTER			Director Name ROBIN BEACHAM		
Street Address 156 OAK STREET			Street Address 156 OAK STREET		
City NEWTON UPPER FALLS	State MA	Zip 02464	City NEWTON UPPER FALLS	State MA	Zip 02464
Director Name JAMES SALZANO			Director Name		
Street Address 156 OAK STREET			Street Address		
City NEWTON UPPER FALLS	State MA	Zip 02464	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares NONE	Class/Series NONE	Par Value NONE

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date _____
Check No. FEB 28 2011
By: 4014820

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Maureen Grady 2/23/11
Signature Date
MAUREEN GRADY
Print or Type Name
TREASURER
Title