

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 854963

**Entity Name:** RETAIL STORE OPERATIONS, INC.

**Current Principal Place of Business:**

3 LIMITED PARKWAY  
COLUMBUS, OH 43230

**Current Mailing Address:**

3 LIMITED PARKWAY  
ATTENTION: CORPORATE SECRETARY  
COLUMBUS, OH 43230 US

**FEI Number:** 31-1022954

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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 DIRECTOR, SENIOR VICE PRESIDENT  
& TREASURER

Name FABER, TIMOTHY J

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title DIRECTOR, PRESIDENT, CHIEF  
LEGAL OFFICER & CORPORATE  
SECRETARY

Name WU, MICHAEL

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title CHIEF FINANCIAL OFFICER

Name BORATTO, EVA

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title SENIOR VICE PRESIDENT &  
CONTROLLER

Name MEETING, DAVID ANDREW

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title ASSISTANT TREASURER

Name LAKNER, ERIC

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title ASSISTANT TREASURER

Name MILLER, MATTHEW

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title ASSISTANT TREASURER

Name HUNTER, JASALYN

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

Title ASSISTANT TREASURER

Name JANDER, DONALD

Address 3 LIMITED PARKWAY

City-State-Zip: COLUMBUS OH 43230

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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:** TOBIN NELSON

**ASSISTANT CORPORATE SECRETARY** 05/06/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASSISTANT TREASURER  
Name WLODARSKI, DOUGLAS  
Address 3 LIMITED PARKWAY  
City-State-Zip: COLUMBUS OH 43230

Title ASSISTANT CORPORATE  
SECRETARY  
Name NELSON, TOBIN  
Address 3 LIMITED PARKWAY  
City-State-Zip: COLUMBUS OH 43230