No. C 162369	Due	Due no later than Sep 30, 2011 2. Registered Agent and Address (NO PO BOX)					
Return to: SECRETARY OF STATE		Annual Report Form CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	COLDWATER C MONA TAX DE ONE COLDWAT	COLDWATER CREEK THE SPA INC. MONA TAX DEPT ONE COLDWATER CREEK DR SANDPOINT ID 83864		BOISE ID 83713 USA 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and E	Business Addresses of F	President, Secretary, and Directors. Treasure	r (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER L MICHELLE CARLONE		ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864	
PRESIDENT GERARD EL CHAAR		ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864	
SECRETARY NURIA	MCCLURE	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of: 6. Annual Re		must be signed.*					
ID	Signature: L M	Signature: L Michelle Carlone		Date: 07/19/2011			
C 162369	Name (type or	Name (type or print): L Michelle Carlone		Title: Assistant Treasurer			
Processed 07/19/2011	* Electronically pr	* Electronically provided signatures are accepted as original signatures.					