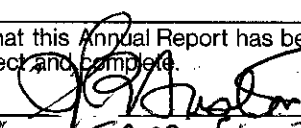
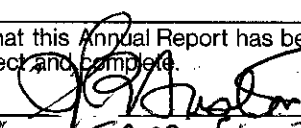
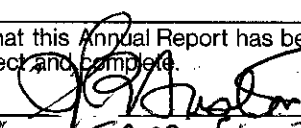


| No. <b>78577 AUG 1 8 1990</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Idaho Corporation Annual Report Form</b><br><i>Due No Later Than November 1, 1990</i>                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 2. Registered Agent and Office<br><br><b>C T CORPORATION SYSTEM</b><br><b>300 NORTH 6TH STREET</b><br><br><b>BOISE ID 83701 58</b> |              |                                                                                                                                                |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------|-------------|--------------|------------|------------|---------------------------|--------------------------------|-----------------|-----------|--------------|------------|----------------------|--------------------------|-----------------|-----------|--------------|------------|----------------------|---|---|---|---|--|-----------------------|---|---|---|---|
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br><b>NO FEE REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1. Mailing Address — Please Correct<br><br><b>LANE BRYANT, INC.</b><br><del>V. ALCANTARA M. Wray</del><br><del>11 WEST 42ND ST.</del><br><b>2800 Corporate Exchange</b><br><del>NEW YORK NY 10036</del><br><del>Columbus OH 43231</del> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 3. Incorporated Under The Laws<br>of <b>DE</b><br><br><b>NO: 078577</b>                                                            |              |                                                                                                                                                |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4. Names and Addresses of Officers and Directors                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                    |              |                                                                                                                                                |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 5%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td><b>Cheryl Nido Turpin</b></td> <td><b>2800 Corporate Exchange</b></td> <td><b>Columbus</b></td> <td><b>OH</b></td> <td><b>43231</b></td> </tr> <tr> <td>Secretary:</td> <td><b>Timothy Lyons</b></td> <td><b>1 Limited Parkway</b></td> <td><b>Columbus</b></td> <td><b>OH</b></td> <td><b>43230</b></td> </tr> <tr> <td>Directors:</td> <td><b>Timothy Lyons</b></td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> </tr> <tr> <td></td> <td><b>Kenneth Gilman</b></td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> </tr> </tbody> </table> |                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                    |              |                                                                                                                                                | <u>Name</u>                                   | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | <b>Cheryl Nido Turpin</b> | <b>2800 Corporate Exchange</b> | <b>Columbus</b> | <b>OH</b> | <b>43231</b> | Secretary: | <b>Timothy Lyons</b> | <b>1 Limited Parkway</b> | <b>Columbus</b> | <b>OH</b> | <b>43230</b> | Directors: | <b>Timothy Lyons</b> | " | " | " | " |  | <b>Kenneth Gilman</b> | " | " | " | " |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>Name</u>                                                                                                                                                                                                                             | <u>Street or P.O. Address</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>City</u>                                                                                                                        | <u>State</u> | <u>Zip</u>                                                                                                                                     |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
| President:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Cheryl Nido Turpin</b>                                                                                                                                                                                                               | <b>2800 Corporate Exchange</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Columbus</b>                                                                                                                    | <b>OH</b>    | <b>43231</b>                                                                                                                                   |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
| Secretary:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Timothy Lyons</b>                                                                                                                                                                                                                    | <b>1 Limited Parkway</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Columbus</b>                                                                                                                    | <b>OH</b>    | <b>43230</b>                                                                                                                                   |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
| Directors:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Timothy Lyons</b>                                                                                                                                                                                                                    | "                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | "                                                                                                                                  | "            | "                                                                                                                                              |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Kenneth Gilman</b>                                                                                                                                                                                                                   | "                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | "                                                                                                                                  | "            | "                                                                                                                                              |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
| 5. Nature of Business<br><br><b>Women's Speciality Clothing</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                         | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><br><table style="width: 100%;"> <tr> <td style="width: 50%;">           Signature <br/>           Name (Typed or Printed) <b>SAMUEL R. GASTON</b> </td> <td style="width: 50%;">           Date <b>8/20/90</b><br/>           Title <b>EX. V. P.</b> </td> </tr> </table> |                                                                                                                                    |              | Signature <br>Name (Typed or Printed) <b>SAMUEL R. GASTON</b> | Date <b>8/20/90</b><br>Title <b>EX. V. P.</b> |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |
| Signature <br>Name (Typed or Printed) <b>SAMUEL R. GASTON</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date <b>8/20/90</b><br>Title <b>EX. V. P.</b>                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                    |              |                                                                                                                                                |                                               |                               |             |              |            |            |                           |                                |                 |           |              |            |                      |                          |                 |           |              |            |                      |   |   |   |   |  |                       |   |   |   |   |