

1.) CORPORATION NAME:

**STEIN MART, INC.**

DUE DATE: **3/31/2012**

SCC ID NO: **F1100645**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY  
JAMES C BRINCEFIELD JR  
526 KING ST  
ALEXANDRIA, VA 22314**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ALEXANDRIA CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**FL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1200 RIVERPLACE BLVD.

CITY/ST/ZIP: JACKSONVILLE, FL 32207-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GREGORY W KLEFFNER  
TITLE: EVP/CFO  
ADDRESS: 1200 RIVERPLACE BOULEVARD  
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-

OFFICER

DIRECTOR

NAME: JOHN H. WILLIAMS, JR.  
TITLE: VICE CHAIRMAN  
ADDRESS: 1200 RIVERPLACE BLVD.  
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-

OFFICER

DIRECTOR

NAME: LINDA FARTHING  
TITLE: DIRECTOR  
ADDRESS: 1200 RIVERPLACE BLVD  
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-

OFFICER

DIRECTOR

NAME: CLAYTON E. ROBERSON, JR.  
TITLE: SVP/TREAS/CONT  
ADDRESS: 1200 RIVERPLACE BLVD.  
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-

OFFICER

DIRECTOR

NAME: D. HUNT HAWKINS  
TITLE: VICE PRESIDENT  
ADDRESS: 1200 RIVERPLACE BLVD  
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-

OFFICER

DIRECTOR

NAME: GARYL L. PIERCE TITLE: VICE PRESIDENT ADDRESS: 1200 RIVERPLACE BLVD CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JAY STEIN TITLE: PRESIDENT ADDRESS: 1200 RIVERPLACE BLVD. CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MITCHELL W. LEGLER TITLE: DIRECTOR ADDRESS: C/O MITCHELL W. LEGLER, P.A. 300-A WHARFSIDE WAY CITY/ST/ZIP/CO: JACKSONVILLE, FL 32203-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MARTIN E. STEIN TITLE: DIRECTOR ADDRESS: C/O REGENCY REALTY CORP 121 WEST FORSYTH ST. CITY/ST/ZIP/CO: JACKSONVILLE, FL 32202-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: RICHARD SISISKY TITLE: DIRECTOR ADDRESS: 6676 EPPING FORREST WAY, NORTH CITY/ST/ZIP/CO: JACKSONVILLE, FL 32207-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: SUSAN FALK TITLE: DIRECTOR ADDRESS: 1040 PARK AVENUE APT. 14F CITY/ST/ZIP/CO: NEW YORK, NY 10028-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: RALPH ALEXANDER TITLE: DIRECTOR ADDRESS: 79 GOLDEN SCROLL CIRCLE CITY/ST/ZIP/CO: THE WOODLANDS, TX 77382-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: IRWIN COHEN TITLE: DIRECTOR ADDRESS: 126 SAN MARCO DRIVE CITY/ST/ZIP/CO: PALM BEACH, FL 33418-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT L. METTLER TITLE: DIRECTOR ADDRESS: 11986 LOCKRIDGE RD CITY/ST/ZIP/CO: STUDIO CITY, CA 91604-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
<u>/s/ CLAYTON E. ROBERSON, JR.</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>CLAYTON E. ROBERSON, JR.,</u> SVP/TREAS/CONT PRINTED NAME AND CORPORATE TITLE
<u>3/16/2012</u> DATE	

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.