

1.) CORPORATION NAME:

AnnTaylor Retail, Inc.

DUE DATE: **12/30/2010**

SCC ID NO: **F1405127**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: TAX DEPARTMENT
476 WHEELERS FARMS ROAD

CITY/ST/ZIP: MILFORD, CT 06461-

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:	KAY KRILL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	7 TIMES SQUARE 15TH FL		
CITY/ST/ZIP/CO:	NEW YORK, NY 10036-		
NAME:	BARBARA EISENBERG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	S/EVP/GC		
ADDRESS:	7 TIMES SQUARE 15TH FL		
CITY/ST/ZIP/CO:	NEW YORK, NY 10036-		
NAME:	MICHAEL J NICHOLSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO/T		
ADDRESS:	7 TIMES SQUARE 15TH FL		
CITY/ST/ZIP/CO:	NEW YORK, NY 10036-		
NAME:	CHRISTOPHER SHULTZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREAS		
ADDRESS:	476 WHEELERS FARMS RD		
CITY/ST/ZIP/CO:	MILFORD, CT 06461-		

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/ CHRISTOPHER SHULTZ</u>	CHRISTOPHER SHULTZ, ASST	<u>11/30/2010</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREAS PRINTED NAME AND CORPORATE TITLE	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.