

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000002668

FILED
May 30, 2003
Secretary of State

Entity Name: LE CREUSET OF AMERICA, INC.

Current Principal Place of Business:

114 BOB GIFFORD BLVD
EARLY BRANCH, SC 29916 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 67
EARLY BRANCH, SC 29916 US

New Mailing Address:

FEI Number: 57-0649852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: VAN ZUYDAM, PAUL V
Address: 114 BOBGIFFORD BLVD
City-St-Zip: EARLY BRANCH, SC 29916

Title: COO () Delete
Name: GOODING, FAYE H
Address: 114 BOB GIFFORD BLVD
City-St-Zip: EARLY BRANCH, SC 29916

Title: ST () Delete
Name: BELGER, JR, ANDREW J
Address: 114 BOB GIFFORD BLVD
City-St-Zip: EARLY BRANCH, SC 29916

Title: CFO () Delete
Name: FREEMAN, BARBARA O
Address: 114 BOB GIFFORD BLVD
City-St-Zip: EARLY BRANCH, SC 29916

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: MARFLEET, STEPHEN DIRECTO
Address: 114 BOB GIFFORD BLVD
City-St-Zip: EARLY BRANCH, SC 29916

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA FREEMAN

CFO

05/30/2003

Electronic Signature of Signing Officer or Director

_____ Date