

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90222 037 \*\*\*150.00

**DOCUMENT # F00000000014**

1. Entry Name

**OSHKOSH B'GOSH RETAIL, INC.**

**613194**



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>112 OTTER AVENUE OSHKOSH WI 54901</b>	Mailing Address <b>P.O. BOX 333 OSHKOSH WI 54903-0333</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number <b>39-1979427</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City **FL** Zip Code \_\_\_\_\_

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD WACHTEL, MICHAEL D 112 OTTER AVENUE OSHKOSH WI 54901</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V LOWRY, PAUL 112 OTTER AVENUE OSHKOSH WI 54901</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTSD OMACHINSKI, DAVID L 112 OTTER AVENUE OSHKOSH WI 54901</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S DUBACK, STEVEN R 411 EAST WISCONSIN AVENUE MILWAUKEE WI 53202</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HYDE, DOUGLAS W 112 OTTER AVENUE OSHKOSH WI 54901</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David L. Omachinski **David L. Omachinski** 1/18/01 920-232-4140  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment  
DH# 700000000014

**OSHKOSH B'GOSH RETAIL, INC.**

**FEIN: 39-1979427**

**Jan. 1, 2000**

**OFFICERS:**

<u>NAME &amp; TITLE</u>	<u>Business ADDRESS</u>	<u>SS#</u>	<u>EFFECTIVE</u>
<b>Michael D. Wachtel</b> CEO and President	112 Otter Ave. Oshkosh, WI 54901	392-48-8021	1/1/00
<b>Paul A. Lowry</b> V.P. - Retail	112 Otter Ave. Oshkosh, WI 54901	559-92-3117	1/1/00
<b>David L. Omachinski</b> CFO and Treasurer	112 Otter Ave. Oshkosh, WI 54901	387-58-1769	1/1/00
<b>Steven R. Duback</b> Secretary	411 E. Wisconsin Ave. Milwaukee, WI 53202-4497	393-44-4465	1/1/00

**DIRECTORS:**

<u>NAME &amp; TITLE</u>	<u>Business ADDRESS</u>	<u>SS#</u>	<u>EFFECTIVE</u>
<b>Douglas W. Hyde</b> Director	112 Otter Ave. Oshkosh, WI 54901	398-44-7218	1/1/00
<b>Michael D. Wachtel</b> Director	112 Otter Ave. Oshkosh, WI 54901	392-48-8021	1/1/00
<b>David L. Omachinski</b> Director	112 Otter Ave. Oshkosh, WI 54901	387-58-1769	1/1/00