2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# F00000000014

Entity Name: OSHKOSH B'GOSH RETAIL, INC.

Current Principal Place of Business:

112 OTTER AVENUE
OSHKOSH, WI 54901

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 333
OSHKOSH, WI 549030333

New Mailing Address:

FEI Number: 39-1979427 **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: D ( ) Delete
Name: HYDE, DOUG W
Address: 112 OTTER AVENUE
City-St-Zip: OSHKOSH, WI 54901

Title: VPD ( ) Delete
Name: LOWRY, PAUL
Address: 112 OTTER AVENUE
City-St-Zip: OSHKOSH, WI 54901

Title: PD ( ) Delete
Name: OMACHINSKI, DAVID L
Address: 112 OTTER AVENUE
City-St-Zip: OSHKOSH, WI 54901

Title: S ( ) Delete
Name: DUBACK, STEVEN R
Address: 411 EAST WISCONSIN AVENUE
City-St-Zip: MILWAUKEE, WI 53202

Title: AS ( ) Delete
Name: CHRISTENSEN, PAUL
Address: 112 OTTER AVENUE
City-St-Zip: OSHKOSH, WI 54901

Title: VPT ( ) Delete
Name: HEIDER, MICHAEL L
Address: 112 OTTER AVE
City-St-Zip: OSHKOSH, WI 54901

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

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

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: MICHAEL L HEIDER VPT 04/27/2005

Electronic Signature of Signing Officer or Director — Date