

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

269-56515-32302

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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F53231** (9)  
1. Corporation Name  
**MELBOURNE SQUARE KAY-BEE TOY, INC.**



Principal Place of Business: **100 WEST ST. PITTSFIELD MA 01201**  
Mailing Address: **100 WEST ST. PITTSFIELD MA 01201**

3. Date Incorporated or Qualified: **11/09/1981**  
3a. Date of Last Report: **04/12/1995**  
4. FEI Number: **04-2765823**  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
**UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and director if applicable. If FEI Registered Agent, signature is required when registering.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>V</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>P C.O.O.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FINE, ALAN</b>	1.2 NAME	
STREET ADDRESS	<b>9 CLIFFWOOD ST</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>LENOX MA</b>	1.4 CITY-ST-ZIP	
TITLE	<b>PD</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>IVERSON, ANN</b>	2.2 NAME	
STREET ADDRESS	<b>100 WEST STR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PITTSFIELD MA</b>	2.4 CITY-ST-ZIP	
TITLE	<b>DVPS</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FARRELL, DAVID</b>	3.2 NAME	<b>JOHN HENDRIX</b>
STREET ADDRESS	<b>SR 68 143A N/A</b>	3.3 STREET ADDRESS	<b>106 APPLE TREE LN</b>
CITY-ST-ZIP	<b>SOUTHFIELD MA</b>	3.4 CITY-ST-ZIP	<b>DAITON MA 01226</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RICHARDS, ARTHUR</b>	4.2 NAME	
STREET ADDRESS	<b>ONE THEALL RD</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>RYE NY</b>	4.4 CITY-ST-ZIP	
TITLE	<b>V</b> <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KURLANDER, CRAIG</b>	5.2 NAME	
STREET ADDRESS	<b>7MEADOW RIDGE DR</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PITTSFIELD MA</b>	5.4 CITY-ST-ZIP	
TITLE	<b>VP</b> <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PALINO, ANTHONY</b>	6.2 NAME	
STREET ADDRESS	<b>45 PINE KNOLL RD</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>LENOX MA</b>	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **X DBWEGROCKI** **DBWEGROCKI** **4-1-96** **413499086**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date of Filing

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KAY-BEE TOYS/TOY WORKS - SUBSIDIARIES

<u>Name</u>	<u>Title</u>	<u>Business Address</u>	<u>Residence Address</u>
Alan Fine	President & C.O.O.	100 West Street Pittsfield, MA 01201	9 Cliffwood Street Lenox, MA 01240
Anthony Palino	Vice President & Assistant Secretary	100 West Street Pittsfield, MA 01201	45 Pine Knoll Rd. Lenox, MA 01240
Donald B. Wegrocki	Assistant Secretary, Asst Treasurer	100 West Street Pittsfield, MA 01201	77 Frederick Drive Dalton, MA 01226
John Hendrix	CFO, Sr. Vice President, Treasurer & Secretary	100 West Street Pittsfield, MA 01201	106 Apple Tree Lane Dalton, MA 01226
Salvatore Vasta	Vice President	100 West Street Pittsfield, MA 01201	89 Dunmore Court Lenox, MA 01240
Patricia Ippoliti	Senior Vice President	100 West Street Pittsfield, MA 01201	108 E Housatonic St Apt 7 Pittsfield, MA 01201

<u>Name</u>	<u>Title</u>	<u>Business Address</u>	<u>Residence Address</u>
Nick Seufert	Vice President	100 West Street Pittsfield, MA 01201	106 E Housatonic St. Apt 3 Pittsfield, MA 01201
Bonnie Burton	Vice President	100 West Street Pittsfield, MA 01201	22 Tamie way Pittsfield, MA 01201
Mark R. Johnson	Assistant Controller / Asst Sec. / Asst Treasurer	100 West Street Pittsfield, MA 01201	140 Raymond Drive Dalton, MA 01226
Neil Watanabe	Vice President & Controller	100 West Street Pittsfield, MA 01201	30231 Cheret Lane Rancho Palos Verdes, CA 90275
Thomas Alfonsi	Vice President	100 West Street Pittsfield, MA 01201	6 Daralyn Ct. Pittsfield, MA 01201
David W. Kinsley	Vice President	100 West Steet Pittsfield, MA 01201	44 Victoria Lane Lanesboro, MA 01237
Dave Gary	Vice President	100 West Street Pittsfield, MA 01201	611 South St. Dalton, MA 01226
Arthur V. Richards	Director	One Theall Rd. Rye, NY 10580	63 Kipp St. Chappaqua, NY 10514