

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 26, 1999 8:00 am
Secretary of State

03-26-1999 90034 001 ***150.00

DOCUMENT # P20418

1. Corporation Name

LENOX OF NEW JERSEY, INCORPORATED

Principal Place of Business

100 LENOX DRIVE
LAWRENCEVILLE NJ 08648

Mailing Address

100 LENOX DRIVE
LAWRENCEVILLE NJ 08648

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1988

4. FEI Number

21-0498476

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> DELETE |
|-------|---------------------|-----------------|-----------------------------|---------------------------------|
| CD | BROWN, OWSLEY II | 850 DIXIE HWY | LOUISVILLE KY | |
| PCEO | STEARNS, RICHARD E. | 100 LENOX DRIVE | LAWRENCEVILLE NJ | |
| SVP | CISZEWSKI, JEROME J | 100 LENOX DR | LAWRENCEVILLE NJ 08648-2394 | |
| SVPD | FANTIN, LOUIS A. | 100 LENOX DR | LAWRENCEVILLE NJ | |
| SVP | WILSON, JAMES D | 100 LENOX DR. | LAWRENCEVILLE NJ 08648-2394 | |
| P | SCALA, LOUIS C | 100 LENOX DR | LAWRENCEVILLE NJ 08648-2394 | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|-----------|----------|--------------------|-----------------|--|
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

(see also attached list)

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert O. Cohen,
Assistant Secretary

609-844-1331

Date

Daytime Phone #

CR2E034 (11/98)

P20418

265718-90034-1

LENOX, INCORPORATED
LIST OF OFFICERS

| <u>Name & Title</u> | <u>Business Address</u> |
|---|---|
| Stanley E. Krangel President | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| Alan M. Aronovitz Senior Vice President and Chief Financial Officer | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| Jerome J. Ciszewski Senior Vice President and President, Lenox Operations Group | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| Louis A. Fantin Senior Vice President, Secretary & Lenox Counsel | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| James D. Wilson Senior Vice President, Human Resources | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| Louis C. Scala President, Lenox Brands | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| David Herman President, Dansk and Lenox Retail | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| Martha A. Curren President, Lenox Collections | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |
| Robert O. Cohen Assistant Secretary | 100 Lenox Drive Lawrenceville, NJ 08648-2394 |

LIST OF DIRECTORS

| | |
|-----------------------------|--|
| Barry D. Bramley (Chairman) | Brown-Forman Corporation Cavendish House 51-55 Mortimer Street London, WIN 8JE UK |
| Owsley Brown II | 850 Dixie Highway Louisville, KY 40210 |
| Owsley Brown Frazier | 850 Dixie Highway Louisville, KY 40210 |
| Ina Brown Bond | River Bend Farm PO Box 284 8215 West Highway 42 Goshen, KY 40026 |
| Laura Lee Brown | 7001 U.S. Highway 42 Lyndon, KY 40241 |

#P20418 (CONT'D.)
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BOARD OF DIRECTORS CONTINUED

W.L. Lyons Brown III

4100 Newport Place, Suite 500
Newport Beach, CA 92660

Stanley E. Krangel

100 Lenox Drive
Lawrenceville, NJ 08648-2394

Laura Huneke

731 E. Main Street
Louisville, KY 40202

Mary Louise Norton

100 Lenox Drive
Lawrenceville, NJ 08648

Peter D. Whitford

Structure, Inc.
2 Limited Parkway
Columbus, OH 43230

(Rev. 1/27/99)