

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

| CORPORATION ANNUAL REPORT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                     | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Northam<br>Secretary of State<br>DIVISION OF CORPORATIONS |                                                       | APPROVED AND FILED<br>1995 MAY -1 4 8 47<br>TALLAHASSEE, FLORIDA<br>700001492547<br>-05/17/95--01173-024<br>*****25.00 *****25.00                           |                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| 1099-1995<br>36515-33502<br>DOCUMENT # P93000015735 (2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                     |                                                                                                    |                                                       |                                                                                                                                                             |                                                                       |
| 1. Corporation Name<br>GOVERNOR'S SQUARE KAY-BEE TOY, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                    |                                                       |                                                                                                                                                             |                                                                       |
| Principal Place of Business<br>100 WEST ST<br>PITTSFIELD MA 01201<br>US                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                     | Mailing Address<br>100 WEST ST<br>PITTSFIELD MA 01201<br>US                                        |                                                       | DO NOT WRITE IN THIS SPACE.                                                                                                                                 |                                                                       |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     | 2a. Mailing Address                                                                                |                                                       | 3. Date Incorporated or Qualified<br>03/02/1993                                                                                                             | 3a. Date of Last Report<br>04/12/1994                                 |
| 21                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Suite, Apt. #, etc. | 26                                                                                                 | Suite, Apt. #, etc.                                   | 4. FEI Number<br>APPLIED FOR                                                                                                                                | Applied For<br><input checked="" type="checkbox"/> Not Applicable     |
| 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | City & State        | 27                                                                                                 | City & State                                          | 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                   | \$8.75 Additional Fee Required                                        |
| 23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Zip                 | 28                                                                                                 | Country                                               | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                          | \$5.00 May Be Added to Fees                                           |
| 24                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country             | 29                                                                                                 | Country                                               | 6. This corporation has liability for intangible tax under G. 189.002, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                                                       |
| 9. Name and Address of Current Registered Agent<br>UNITED STATES CORPORATION COMPANY<br>1201 HAYS STREET<br>SUITE 105<br>TALLAHASSEE FL 32301                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                     |                                                                                                    |                                                       | 10. Name and Address of New Registered Agent                                                                                                                |                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |                                                                                                    |                                                       | 81 Name                                                                                                                                                     |                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |                                                                                                    |                                                       | 82 Street Address (P.O. Box Number is Not Acceptable)                                                                                                       | 700001492547<br>-05/17/95--01173-023<br>*****200.00 *****200.00<br>FL |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |                                                                                                    |                                                       | 83                                                                                                                                                          |                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |                                                                                                    |                                                       | 84 City                                                                                                                                                     |                                                                       |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing.)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                     |                                                                                                    |                                                       |                                                                                                                                                             |                                                                       |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                    | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                                                                                                             |                                                                       |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | PD                  | 11 TITLE                                                                                           | P                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                |                                                                       |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | POLITZER, JERALD    | 12 NAME                                                                                            | Ann Iverson                                           |                                                                                                                                                             |                                                                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 100 WEST ST         | 13 STREET ADDRESS                                                                                  | 410 Williams St                                       |                                                                                                                                                             |                                                                       |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PITTSFIELD MA 01201 | 14 CITY - ST - ZIP                                                                                 | Pittsfield, MA 01201                                  |                                                                                                                                                             |                                                                       |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | VP                  | 21 TITLE                                                                                           |                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                           |                                                                       |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FINE, ALAN          | 22 NAME                                                                                            |                                                       |                                                                                                                                                             |                                                                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 100 WEST ST         | 23 STREET ADDRESS                                                                                  |                                                       |                                                                                                                                                             |                                                                       |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PITTSFIELD MA 01201 | 24 CITY - ST - ZIP                                                                                 |                                                       |                                                                                                                                                             |                                                                       |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | VP                  | 31 TITLE                                                                                           | VP                                                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                |                                                                       |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | KURLANDER, CRAIG M  | 32 NAME                                                                                            | Thomas Nelson                                         |                                                                                                                                                             |                                                                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 100 WEST ST         | 33 STREET ADDRESS                                                                                  | 55 Soanne Dr.                                         |                                                                                                                                                             |                                                                       |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PITTSFIELD MA 01201 | 34 CITY - ST - ZIP                                                                                 | Stoughton, MA 02072                                   |                                                                                                                                                             |                                                                       |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | VAS                 | 41 TITLE                                                                                           |                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                           |                                                                       |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PALINO, ANTHONY     | 42 NAME                                                                                            |                                                       |                                                                                                                                                             |                                                                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 100 WEST STR        | 43 STREET ADDRESS                                                                                  |                                                       |                                                                                                                                                             |                                                                       |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PITTSFIELD MA 01201 | 44 CITY - ST - ZIP                                                                                 |                                                       |                                                                                                                                                             |                                                                       |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | V                   | 51 TITLE                                                                                           | VP                                                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                |                                                                       |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | MACKENZIE, JAMES D  | 52 NAME                                                                                            | Bruce H. Campbell                                     |                                                                                                                                                             |                                                                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 100 WEST STR        | 53 STREET ADDRESS                                                                                  | 37 Wyngate Dr.                                        |                                                                                                                                                             |                                                                       |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PITTSFIELD MA 01201 | 54 CITY - ST - ZIP                                                                                 | Avon CT 06001                                         |                                                                                                                                                             |                                                                       |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | V                   | 61 TITLE                                                                                           | VP                                                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                |                                                                       |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FALZARENO, CATHRYN  | 62 NAME                                                                                            | Patricia Ippoliti                                     |                                                                                                                                                             |                                                                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 100 WEST STR        | 63 STREET ADDRESS                                                                                  | 100 West St.                                          |                                                                                                                                                             |                                                                       |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PITTSFIELD MA 01201 | 64 CITY - ST - ZIP                                                                                 | Pittsfield MA 01201                                   |                                                                                                                                                             |                                                                       |
| 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 110.07(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: <i>[Signature]</i> John Hendrix 3/28/95<br>_____<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |                                                                                                    |                                                       |                                                                                                                                                             |                                                                       |



100 West St., Pittsfield, Massachusetts 01201-5781  
(413) 498-0088 Fax (413) 498-3739

## KAY-BEE TOYS/TOY WORKS - SUBSIDIARIES

2

| <u>Name</u>       | <u>Title</u>                                               | <u>Business Address</u>                 | <u>Residence Address</u>                    |
|-------------------|------------------------------------------------------------|-----------------------------------------|---------------------------------------------|
| Ann Iverson       | President<br>& CEO                                         | 100 West Street<br>Pittsfield, Ma 01201 | 410 Williams Street<br>Pittsfield, MA 01201 |
| Alan Fine         | Senior<br>Vice<br>President                                | 100 West Street<br>Pittsfield, MA 01201 | 9 Cliffwood Street<br>Lenox, MA 01240       |
| Thomas Nelson     | Vice<br>President                                          | 100 West Street<br>Pittsfield, Ma 01201 | 55 Joanne Road.<br>Stoughton, MA 02072      |
| Anthony Palino    | Vice<br>President<br>& Assistant<br>Secretary              | 100 West Street<br>Pittsfield, MA 01201 | 45 Pine Knoll Rd.<br>Lenox, MA 01240        |
| Bruce H. Campbell | Vice<br>President                                          | 100 West Street<br>Pittsfield, MA 01201 | 37 Wyngate Drive<br>Avon, CT 06001          |
| R. Michael Cronin | Vice<br>President<br>& Assistant<br>Secretary              | 100 West Street<br>Pittsfield, MA 01201 | 197 Bartlett Ave<br>Pittsfield, MA 01201    |
| David B. Farrell  | CFO,<br>Sr. Vice<br>President,<br>Treasurer &<br>Secretary | 100 West Street<br>Pittsfield, MA 01201 | SR 68 Box 143A<br>Southfield, MA 01259      |
| Roland C. Faubert | Vice<br>President                                          | 100 West Street<br>Pittsfield, MA 01201 | 31 Churchill Crest<br>Pittsfield, MA 01201  |
| Kathy A. Self     | Vice<br>President                                          | 100 West Street<br>Pittsfield, MA 01201 | 6502 Coppercreek Rd.<br>Dallas, TX 75248    |
| Mark Ramsdell     | Vice<br>President                                          | 100 West Street<br>Pittsfield, MA 01201 | 4 Shady Hollow Path<br>Ashland, MA 01721    |



| <u>Name</u>        | <u>Title</u>                                                                   | <u>Business Address</u>                 | <u>Residence Address</u>                              |
|--------------------|--------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------|
| Dennis Veltre      | Vice President                                                                 | 100 West Street<br>Pittsfield, MA 01201 | 36 Andover St.<br>Pittsfield, MA 01201                |
| Salvatore Vasta    | Vice President                                                                 | 100 West Street<br>Pittsfield, MA 01201 | East St. - Oct. Mt.<br>RR2 - Box 255<br>Lee, MA 01201 |
| Robert Danielson   | Vice President                                                                 | 100 West Street<br>Pittsfield, MA 01201 | 6 Juliana Dr.<br>Pittsfield, MA 01201                 |
| Patricia Ippoliti  | Senior Vice President                                                          | 100 West Street<br>Pittsfield, MA 01201 | 3C Foxhollow<br>Lenox, MA 01240                       |
| Nick Seufert       | Vice President                                                                 | 100 West Street<br>Pittsfield, MA 01201 | 106 East Housatonic St.<br>Pittsfield, MA 01201       |
| John L. Hendrix    | Vice President,<br>Assistant Treasurer,<br>Assistant Secretary &<br>Controller | 100 West Street<br>Pittsfield, MA 01201 | 106 Apple Tree Ln.<br>Dalton, MA 01226                |
| Mark R. Johnson    | Assistant Controller                                                           | 100 West Street<br>Pittsfield, MA 01201 | 140 Raymond Drive<br>Dalton, MA 01226                 |
| Thomas Alfonsi     | Vice President                                                                 | 100 West Street<br>Pittsfield, MA 01201 | 6 Daryn Ct.<br>Pittsfield, MA 01201                   |
| David W. Kinsley   | Vice President                                                                 | 100 West Steet<br>Pittsfield, MA 01201  | 11 Upper Greylock Est.<br>Lanesboro, MA 01237         |
| Maureen Richards   | Director                                                                       | One Theall Rd.<br>Rye, NY 10580         | 640 West 231 St.<br>Bronx, NY 12061                   |
| Shahid Quraeshi    | Director                                                                       | One Theall Rd.<br>Rye, NY 10580         | 105 Harbor Dr.<br>Stamford, CT 06902                  |
| Arthur V. Richards | Director                                                                       | One Theall Rd.<br>Rye, NY 10580         | 63 Kipp St.<br>Chappaqua, NY 10514                    |