

2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2000 8:00 am**  
**Secretary of State**

05-15-2000 90311 001 \*\*\*150.00

DOCUMENT # H02516

1. Entity Name

K B Toy of Florida, Inc.

Principal Place of Business

Mailing Address

300 Phillipi Rd.  
 PO Box 28512  
 Columbus, OH 43228-0512

300 Phillipi Rd  
 PO Box 28512  
 Columbus, OH 43228-0512

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-2956093

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corporation Service Company  
 1201 Hays Street  
 Tallahassee, FL 32301-2525

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

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

(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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DCP  Delete  
 NAME Glazer, Michael L  
 STREET ADDRESS 100 West Street  
 CITY - ST - ZIP Pittsfield, MA 01201

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE CEO  Delete  
 NAME Glazer, Michael L  
 STREET ADDRESS 100 West Street  
 CITY - ST - ZIP Pittsfield, MA 01201

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE DCV  Delete  
 NAME Potter, Michael J  
 STREET ADDRESS 300 Phillipi Rd  
 CITY - ST - ZIP Columbus, OH 43228

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE DVS  Delete  
 NAME Bell, Albert J  
 STREET ADDRESS 300 Phillipi Rd  
 CITY - ST - ZIP Columbus, OH 43228

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE VT  Delete  
 NAME McGrady, James A  
 STREET ADDRESS 300 Phillipi Rd  
 CITY - ST - ZIP Columbus, OH 43228

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE VP  Delete  
 NAME Watts, Michael L  
 STREET ADDRESS 300 Phillipi Rd  
 CITY - ST - ZIP Columbus, OH 43228

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice Pres & Treasurer

04-25-00

Date

614-278-6835

Daytime Phone #

D0050386

DO NOT WRITE IN THIS SPACE