

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **833640** (6)

1. Corporation Name
AMERICAN STORES COMPANY

100001829561
-05/20/96--01052--002
***200.00

Principal Place of Business: **709 E SOUTH TEMPLE, P.O. BOX 27447, SALT LAKE CITY UT 84127-7447**
Mailing Address: **709 E SOUTH TEMPLE, P.O. BOX 27447, SALT LAKE CITY UT 84127-7447**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25 29 30

3. Date Incorporated or Qualified: **01/10/1975**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **87-0207226**
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. 190.032, Florida Statutes: Yes No

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

I, 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: _____

12. OFFICERS AND DIRECTORS	
TITLE	EVP
NAME	BECK, TERESA
STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY UT
TITLE	PCD
NAME	LUND, VICTOR
STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY UT
TITLE	EVP
NAME	SEARL, A.L.
STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY UT
TITLE	EV
NAME	ANDERSON, KENT T.
STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY UT
TITLE	VP
NAME	FISCHEL, JARED R.
STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY FL
TITLE	SVP
NAME	LUNT, JACK
STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	
32 NAME	VP Paul W. Eldridge
33 STREET ADDRESS	136 East South Temple, 11th Flr.
34 CITY-ST-ZIP	Salt Lake City, UT 84111
41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	VP, T, AS J. Greg Spencer
43 STREET ADDRESS	709 East South Temple
44 CITY-ST-ZIP	Salt Lake City, UT 84102
51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	VP Mark N. Schneider
53 STREET ADDRESS	709 East South Temple
54 CITY-ST-ZIP	Salt Lake City, UT 84102
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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: **Paul W. Eldridge** Paul W. Eldridge 4/29/96 (801) 320-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR