

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

FILED

**Apr 22 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 833640 (6)

1. Corporation Name
AMERICAN STORES COMPANY



Principal Place of Business 709 E SOUTH TEMPLE SALT LAKE CITY UT 84102	Mailing Address P.O. BOX 27447 SALT LAKE CITY UT 84127-0447
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 299 SOUTH MAIN STREET Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State 23 SALT LAKE CITY, UT	27 City & State 28
24 Zip 84111 25 Country USA	29 Zip 30 Country

3. Date Incorporated or Qualified 01/10/1975	
4. FEI Number 87-0207226	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> 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

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 title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CFO <input type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECK, TERESA	1.2 NAME	
STREET ADDRESS	709 EAST SOUTH TEMPLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SALT LAKE CITY UT	1.4 CITY-ST-ZIP	
TITLE	PCD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUND, VICTOR	2.2 NAME	
STREET ADDRESS	709 EAST SOUTH TEMPLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SALT LAKE CITY UT	2.4 CITY-ST-ZIP	
TITLE	SVTS <input type="checkbox"/> DELETE	3.1 TITLE	CFO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIDER, NEAL J	3.2 NAME	
STREET ADDRESS	709 EAST SOUTH TEMPLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SALT LAKE CITY UT	3.4 CITY-ST-ZIP	
TITLE	EV <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, KENT T.	4.2 NAME	
STREET ADDRESS	709 EAST SOUTH TEMPLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	SALT LAKE CITY UT	4.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELDRIDGE, PAUL W	5.2 NAME	
STREET ADDRESS	136 E SOUTH TEMPLE, 11TH FLOOR	5.3 STREET ADDRESS	299 SOUTH MAIN STREET
CITY-ST-ZIP	SALT LAKE CITY FL	5.4 CITY-ST-ZIP	SALT LAKE CITY, UT 84111
TITLE	SVS <input checked="" type="checkbox"/> DELETE	6.1 TITLE	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUNT, JACK	6.2 NAME	MARY V. SLOAN
STREET ADDRESS	444 E 100 S	6.3 STREET ADDRESS	709 EAST SOUTH TEMPLE
CITY-ST-ZIP	SALT LAKE CITY FL 84111	6.4 CITY-ST-ZIP	SALT LAKE CITY, UT 84102

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.

SIGNATURE *[Handwritten Signature]*

CFR2E034 (10/97)