

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000002914

**Entity Name:** NEBRASKA BOOK COMPANY, INC.**Current Principal Place of Business:**4700 S 19TH ST  
LINCOLN, NE 68512**Current Mailing Address:**4700 S 19TH ST  
LINCOLN, NE 68512**FEI Number:** 45-5400913**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name REED, PETER  
Address 200 CLARENDON STREET  
51ST FLOOR  
City-State-Zip: BOSTON MA 02116

Title D  
Name ROTHFLEISCH, MATTHEW  
Address 711 FIFTH AVENUE  
5TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title D  
Name ABRAHAM, ALLISON  
Address 511 NALLS DAIRY COURT  
City-State-Zip: GREAT FALLS VA 22066

Title DIRECTOR, PRESIDENT  
Name CLEMENTE, STEVEN  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512

Title D  
Name BONNER, JUSTIN  
Address 200 CLARENDON STREET  
51ST FLOOR  
City-State-Zip: BOSTON MA 02116

Title D  
Name KLEINMAN, ADAM  
Address 200 CLARENDON STREET  
51ST FLOOR  
City-State-Zip: BOSTON MA 02116

Title D  
Name NG, BENJAMIN  
Address 726 EL CAMINO DEL MAR  
City-State-Zip: SAN FRANCISCO CA 94121

Title TREASURER  
Name OTTERBERG, JON C  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: KEVIN D. HARFORD****SECRETARY****02/25/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name REMPE, NATHAN  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512

Title VP  
Name CLANCY, GWEN  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512

Title SECRETARY  
Name HARFORD, KEVIN  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512

Title VP  
Name KELLY, MICHAEL  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512

Title VP  
Name ZEUCH, WILLIAM  
Address 4700 S 19TH ST  
City-State-Zip: LINCOLN NE 68512