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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 844426

(7)

NEBRASKA BOOK COMPANY, INC.

(1

FILED May 06 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								
4700 SO, 19TH STREET P.O. NOX 80529								
LINCOLN NE 68512 LINCOLN NE 68501-0521			9		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					10/24/1979			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	$\neg \tau$	Apn	lied For
21		26		47-0549819	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8	.75 Ad	
22 27					5. Certificate of Status Desired		ee Req	
City & State City & Sta					6. Election Campaign Financing \$5.00 May Be			lav Be
23		28		Trust Fund Contribution				
Zip Country		Zip Country			8. This corporation owes or has paid the c	urrent yo	ear Intar	rgible
24	25	29	30		Personal Property Tax due June 30. Yes No			
	g, Name and Address of Curre	nt Registered Agent		.1.55	10. Name and Address of New Registered	Agent		
	CORPORATION SYSTEM		8.	Name				
	00 S. PINE ISLAND ROAD		82 Street Ad		dress (P.O. Box Number is Not Acceptable)			
PL	ANTATION FL 33324		<u> </u>	ļ. <u> </u>				
			8:	3				
			8	4 City		85	Zip Co	ode
			Į.	1	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	┕╽╵		
SIGNATURE	Signature, typed or printed name of registered ag	ord and title if applicable (NO		geni signature requ	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDE	CTOPS	IN 12
12.	OFFICERS AN	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	CH CH		IN 12
TITLE NAME	OPPEGARD, MARK W.		1.1 TITLE 1.2 NAME				latiye	L_I ADGILION
	3033 SO. 20TH ST.							
STREET ADDRESS	LINCOLN NE 68502			T ADDRESS				
CITY-ST-ZIP TITLE	VP	DELETE	1.4 CITY - 2.1 TITLE			□ Ch	nanne	Addition
NAME	REMPE, LARRY R.	DEFECT	2.2 NAME				-cingo	
STREET ADDRESS	5712 CALVERT			T ADDRESS				
CITY-ST-ZIP	LINCOLN NE 68506		2.4 CITY		, , , ,			į
TITLE	V	DELETE	3.1 TITLE			Ch	nange	Addition
NAME	HOFF, THOMAS A.		3.2 NAME				-	_
STREET ADDRESS	2823 DRAKE			T ADDRESS				
CITY-ST-ZIP	LINCOLN NE 38516		3.4. CITY					
TITLE	V	DELETE	4.1 TITLE			☐ Ch	ange	Addition
NAME	JIROVSKY, KENNETH J.		4. 2 NAMI	.				
STREET ADORESS	6120 WOODSTOCK		4.3 STREE	T ADDRESS				,
CITY-ST-ZIP	LINCOLN NE 38512		4.4 CITY-	ST-ZIP				
TITLE	VS	☐ DELETE	5.1 TITLE			Ch	ange	Addition
NAME	ARNOT, ARDEAN A		5.2 NAME					
STREET ADDRESS	8333 WATER TOWER CT		5.3 STREE	T ADDRESS				
CITY-ST-ZIP	LINCOLN NE		5.4 CITY -	ST-ZIP				
TITLE	Y	DELETE	6.1 TITLE			Ch	ange	Addition
NAME	NEVIUS, BRUCE E		62 NAME					
STREET ADDRESS	1518 W "O" STREET RD		6.3 STREE	T ADDRESS				i
	DI EÇANT DALE ME			1				

14. I hereby certify that the information supplied with this filling 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:

askenda ault

4-24-98

402-421-7300