## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000002823

Entity Name: COLLEGE BOOKSTORES OF AMERICA, INC.

FILED Apr 03, 2007 Secretary of State

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Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	LITARY TRAIL LM BEACH, FI				
Current Mailing Address:			New Maili	ng Address:	
	CK ISLAND C' D HEIGHTS, I				
FEI Number:	36-3309518	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and	Address of New Registered Agent:	
1201 HAYS		CE COMPANY 01 US			
	named entity of Florida.	submits this statement for the p	urpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KLUND, JAMES 11559 ROCK I		Title: Name: Address: City-St-Zip:	PRES (X) Change ( ) Addition KLUND, JAMES 11559 ROCK ISLAND CT. MARYLAND HEIGHTS, MO 63043	
Title: Name: Address: City-St-Zip:	WIERSMA, RA	E FARM RD., STE. 1	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition WIERSMA, RANDAL 901-D KILDAIRE FARM RD., STE. 1 CARY, NC 27511	
Title: Name: Address: City-St-Zip:	LACEFIELD, B 11559 ROCK I		Title: Name: Address: City-St-Zip:	SEC (X) Change ( ) Addition MORRIS, CYNTHIA 4700 SO. 19TH STREET LINCOLN, NE 68512	
Title: Name: Address: City-St-Zip:	D ( VINER, LONNII 706 WEST MA URBANA, IA 5:	N STREET	Title: Name: Address: City-St-Zip:	CEOD (X) Change ( ) Addition MAJOR, BARRY 4700 SO. 19TH STREET LINCOLN, NE 68512	
Title: Name: Address: City-St-Zip:	D ( BLASSIE, TOM 10 DAYBREAK ST. LOUIS, MC	ESTATES	Title: Name: Address: City-St-Zip:	TREA (X) Change ( ) Addition SIEMEK, ALAN 4700 SO. 19TH STREET LINCOLN, NE 68512	
Title: Name: Address: City-St-Zip:	KNIEPMAN, MI	Y LAKE ESTATES DR.	Title: Name: Address: City-St-Zin:	D (X) Change ( ) Addition OPPEGARD, MARK W 4700 SO. 19TH STREET LINCOLN NE 68512	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES KLUND PRES 04/03/2007