

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

FILED
Mar 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000003821 (3)

1. Corporation Name

HOLLYWOOD VIDEO SUPERSTORES, INC.

Principal Place of Business

25000 SW PARKWAY CENTER DRIVE
WILSONVILLE OR 97070

Mailing Address

25000 SW PARKWAY CENTER DRIVE
WILSONVILLE OR 97070

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1996

4. FEI Number

93-0981138

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CP	DELETE
NAME	WATTLES, MARK J	
STREET ADDRESS	25000 SW PARKWAY CENTER DRIVE	
CITY - ST - ZIP	WILSONVILLE OR 97070	
TITLE	CVS	X DELETE
NAME	EKMAN, DONALD J	(C only)
STREET ADDRESS	25000 SW PARKWAY CENTER DRIVE	
CITY - ST - ZIP	WILSONVILLE OR 97070	
TITLE	D	X DELETE
NAME	CUTLER, JAMES N	
STREET ADDRESS	25000 SW PARKWAY CENTER DRIVE	
CITY - ST - ZIP	WILSONVILLE OR 97070	
TITLE	D	X DELETE
NAME	GALANTI, RICHARD A	
STREET ADDRESS	25000 SW PARKWAY CENTER DRIVE	
CITY - ST - ZIP	WILSONVILLE OR 97070	
TITLE	T	X DELETE
NAME	GORDON, DOUG	
STREET ADDRESS	25000 SW PARKWAY CENTER DRIVE	
CITY - ST - ZIP	WILSONVILLE OR 97070	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	D
2.3 STREET ADDRESS	Donald J. Ekman
2.4 CITY - ST - ZIP	25600 SW Parkway Center Drive
3.1 TITLE	Wilsonville, OR 97070
3.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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:

Donald J. Ekman

Senior Vice President (503) 570-1600

CR2E034 (10/97)