2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003079

Entity Name: BORDERS BOOKS & MUSIC, INC.

FILED Mar 04, 2005 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
100 PHOENIX DR ANN ARBOR, MI 48107 US				100 PHOENIX DR ANN ARBOR, MI 48108 US		
Current Mailing Address:				New Mailing Address:		
PO BOX 7069 ANN ARBOR, MI 48107				PO BOX 7069 ANN ARBOR, MI 48108		
FEI Number	: 38-2104285	FEI Number Applied For ()	FEI Nun	nber Not Appl	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:		Name and	Address of New Registered Agent:	
1200 SOU PLANTATI The above	PORATION SYS TH PINE ISLAN ION, FL 33324 named entity se of Florida.	ID ROAD US	ırpose o	f changing i	its registered office or registered agent, or both,	
SIGNATUI	RE:					
	Electroni	c Signature of Registered Ager	nt		Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICER	S AND DIRECT	rors:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD () JOSEFOWICZ, 100 PHEONIX D ANN ARBOR, MI	R		Title: Name: Address: City-St-Zip:	CD (X) Change () Addition JOSEFOWICZ, GREGORY P 100 PHEONIX DR ANN ARBOR, MI 48108	
Title: Name: Address: City-St-Zip:	PD () HEIM, TAMARA 100 PHOENIX D ANN ARBOR, MI	R		Title: Name: Address: City-St-Zip:	P (X) Change () Addition ALTRUDA, VINCENT E 100 PHOENIX DR ANN ARBOR, MI 48108	
Title: Name: Address: City-St-Zip:	VT () WILHELM, EDW 100 PHOENIX D ANN ARBOR, MI	R.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () SPINOZZI, MICH 100 PHOENIX D ANN ARBOR, MI	RIVE		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition SPINOZZI, MICHAEL G 100 PHOENIX DRIVE ANN ARBOR, MI 48108	
Title: Name: Address: City-St-Zip:	S () CARNEY, THOM 100 PHOENIX D ANN ARBOR, MI	R		Title: Name: Address: City-St-Zip:	VP,S (X) Change () Addition CARNEY, THOMAS 100 PHOENIX DR ANN ARBOR, MI 48108	
Title: Name: Address: City-St-Zip:	SVP () DAVIS, STEPHE 100 PHOENIX D ANN ARBOR, MI	R		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD J. JACKSON VP 03/04/2005