

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

FILED

Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000005775 (8)

1. Corporation Name
CAMPUS C-STORES, INC.



Principal Place of Business
7825 FAY AVE., STE. 228
LA JOLLA CA 92037

Mailing Address
7825 FAY AVE., STE. 228
LA JOLLA CA 92037

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/30/1997	4. FEI Number 33-0737646	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

2. Principal Place of Business 21 7596 EADS AVE STE 201 Suite, Apt. #, etc. 22 City & State LA JOLLA, CA 23 Zip 92037 Country USA	2a. Mailing Address 26 7596 EADS AVENUE Suite, Apt. #, etc. 27 201 28 City & State LA JOLLA, CA 29 Zip 92037 Country USA
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9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	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
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP WYKES, NEIL A 7825 FAY AVE., STE. 228 LA JOLLA CA 92037	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	7596 EADS AVE, STE 201
CITY-ST-ZIP		1.4 CITY-ST-ZIP	LA JOLLA, CA 92037
TITLE	DV KIMBLE, RANDOLPH E 7825 FAY AVE., STE. 228 LA JOLLA CA 92037	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	7596 EADS AVE, STE 201
CITY-ST-ZIP		2.4 CITY-ST-ZIP	LA JOLLA, CA 92037
TITLE	V VENTURINI, MARTIN J 7825 FAY AVE., STE. 228 LA JOLLA CA 92037	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	7596 EADS AVE, STE 201
CITY-ST-ZIP		3.4 CITY-ST-ZIP	LA JOLLA, CA 92037
TITLE	S GLICKMAN, A.B. 1300 E. 9TH ST., STE. 900 CLEVELAND OH 44114	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D PINKAS, ROBERT P 28000 CHAGRIN BLVD., STE. 1150 CLEVELAND OH 44122	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D BERGMAN, JIM 28000 CHAGRIN BLVD., STE. 1150 CLEVELAND OH 44122	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 both in attachment with an address.

SIGNATURE _____

CR2E034 (10/97)