


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

FILED
Apr 10 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 # G43576 (9)
 1. Corporation Name
UNIVERSITY BOOK & SUPPLY, INCORPORATED

Principal Place of Business 1227 W. UNIVERSITY AVENUE GAINESVILLE FL 32601	Mailing Address P. O. BOX 3330 FAYETTEVILLE AR 72702-3330 US
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc. 1936 North Shiloh	Suite, Apt. #, etc.
City & State Fayetteville, Ar.	City & State
Zip 72704	Country
25 Country Washington	30 Country

3. Date Incorporated or Qualified 06/14/1983	
4. FEI Number 59-2293327	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent

NATIONS, DONALD
1227 W. UNIVERSITY AVENUE
GAINESVILLE FL

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	GIBSON, ANDREW J.	
STREET ADDRESS	614 W.SYCAMORE	
CITY-ST-ZIP	FAYETTEVILLE AR	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	ANDERS, STERLING	
STREET ADDRESS	614 WEST SYCAMORE	
CITY-ST-ZIP	614 W.SYCAMORE	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MORGAN, WHITNEY	
STREET ADDRESS	653 W. DICKSON	
CITY-ST-ZIP	614 W.SYCAMORE	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	ANDERS, KAY Z.	
STREET ADDRESS	614 WEST SYCAMORE	
CITY-ST-ZIP	FAYETTEVILLE AR	
TITLE	V	<input type="checkbox"/> DELETE
NAME	NATIONS, DONALD	
STREET ADDRESS	1227 W. UNIVERSITY AVE.	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
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: *[Signature]* Pres. 4-1-98 501-443-9205

CR2E034 (10/97)