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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P09092 1. Corporation Name

AMERICAN STORES PROPERTIES, INC.

299 SOUTH MAIN STREET ATTN TAX DEPT P O BOX 27447 SALT LAKE CITY UT 84111 DO NOT WRITE IN THIS SPACE SALT LAKE CITY UT 84127-447 US 3. Date incorporated or Qualifed 02/14/1986 Applied For 2a. Mailing Address 4. FFI Number 2. Principal Place of Business Not Applicable <del>87-0347040</del> 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, ctc. 5. Certifcate of Status Desired  $\Gamma$ Fee Required 22 27 City & State City & State 6. Flection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country Country Zip 8. This corporation owes the current year Intangible Zip □No ☐ Yes 30 Personal Property Tax. 29 24 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 82 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** 83 Zip Code 85 84 City 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) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 OFFICERS AND DIRECTORS X Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE 1.2 NAME NAME ANDERSON, KENT T 1.3 STREET ADDRESS STREET ADDRESS 709 EAST SOUTH TEMPLE 299 SOUTH MAIN STREET SALT LAKE CITY, UT 84111 **SALT LAKE CITY UT 84102** 1.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ DELETE 21 TITLE (X) Change TITLE 2.2 NAME NAME **BECK, TERESA** 299 SOUTH MAIN STREET -709 E. SOUTH TEMPLE 2.3 STREET ADDRESS STREET ADDRESS SALT LAKE CITY, UT 84111 SALT LAKE CITY UT 2.4 CITY+ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME ELDRIDGE, PAUL W NAME 299 SOUTH MAIN STREET 3.3 STREET ADDRESS STREET ADDRESS SALT: LAKE CITY UT 84111 3.4. CITY-ST-ZIP CITY-ST-ZIP 🖎 Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME SPENCER, GREG 709 E. SOUTH TEMPLE 4.3 STREET ADDRESS 299 SOUTH MAIN STREET STREET ADORESS SALT ĹAKĖ CITY, UŤ 84111 4.4 CITY-ST-ZIP SALT LAKE CITY UT CITY-ST-ZIP ☐ Addition □ DELETE X Change 5.1 TITLE TITLE : 52 NAME NAME SLOAN, MARY V 5.3 STREET ADDRESS 709 E. SOUTH TEMPLE

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SALT LAKE CITY UT

SCHERER DONN D.

1818 SWIFT DR.

THICE PRESIDENT

☐ DELETE

4/5/99

299 SOUTH MAIN STREET

SALT LAKE CITY, UT

1955 WEST NO. AVE.

MELROSE PARK, IL 60160

(801)961-5600

Change

☐ Addition

84111

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90061 010 \*\*\*150.00

CR2E034.(11/98)