

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

FILED
May 15 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 # P13641 (6)
1. Corporation Name
DOUBLEDAY BOOK SHOPS, INC.



Principal Place of Business
122 FIFTH AVE
ATTN: TAX DEPARTMENT
NEW YORK NY 10011
US

Mailing Address
ATTN: TAX DEPT.
ATTN: TAX DEPT
WESTBURY NY 11590
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/17/1987	
21		26	122 Fifth Avenue	4. FEI Number	11-1971604
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For	
22		27	Attn: Tax Department	Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28	NY NY	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		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	
24		29	10011		
Country		Country			
25		30	US		

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPT	1.1 TITLE	
NAME	BABIN, ELIZABETH R	1.2 NAME	
STREET ADDRESS	120 FIFTH AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10011	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	DUFFY, WILLIAM	2.2 NAME	
STREET ADDRESS	1400 OLD COUNTRY ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESTBURY NY 11590	2.4 CITY-ST-ZIP	
TITLE	CEO	3.1 TITLE	
NAME	RIGGIO, LEONARD	3.2 NAME	
STREET ADDRESS	122 FIFTH AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10011	3.4 CITY-ST-ZIP	
TITLE	DS	4.1 TITLE	
NAME	ROSEN, MICHAEL	4.2 NAME	
STREET ADDRESS	1290 AVE OF THE AMERICAS	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	HESELS, JAN M	5.2 NAME	
STREET ADDRESS	DEKLENCKE 8, 1083 H H	5.3 STREET ADDRESS	
CITY-ST-ZIP	AMSTERDAM HO	5.4 CITY-ST-ZIP	
TITLE	P	6.1 TITLE	
NAME	TERRILL, KRISTINE M	6.2 NAME	
STREET ADDRESS	122 FIFTH AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	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 in an attachment with an address.

SIGNATURE: _____ Date: 4/29/98 6:21/683-3298

CR2E034 (10/97)