2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90299 008 ***150.00

645455

DO NOT WRITE IN THIS SPACE

DOCUMENT # P38434

1. Entity Name
CONSOLIDATED STORES CORPORATION

Principal Place of Business	Mailing Address
300 PHILLIPI ROAD ~~P.O. BOX 28512~~ COLUMBUS OH 43228-~~0512~~ 5311	300 PHILLIPI ROAD ~~P.O. BOX 28512~~ COLUMBUS OH 43228-~~0512~~ 5311

2. Principal Place of Business	3. Mailing Address
PO Box terminated	PO Box Terminated
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 31-1186811 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DCP NAME KELLEY , WILLIAM G. STREET ADDRESS 300 PHILLIPI RD. CITY-ST-ZIP COLUMBUS OH 43228-0512	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VSD NAME BELL, ALBERT J. STREET ADDRESS 300 PHILLIPI ROAD CITY-ST-ZIP COLUMBUS OH 43228-0512	☒ Delete	TITLE VSD NAME Charles Haubiel II STREET ADDRESS 300 Phillipi Rd. CITY-ST-ZIP Columbus, OH 43228	☐ Change ☒ Addition
TITLE VT NAME MCGRADY, JAMES A. STREET ADDRESS 300 PHILLIPI ROAD CITY-ST-ZIP COLUMBUS OH 43228-0512	☒ Delete	TITLE VT NAME Joe R. Cooper STREET ADDRESS 300 Phillipi Rd CITY-ST-ZIP Columbus, OH 43228	☐ Change ☒ Addition
TITLE VCD NAME POTTER, MICHAEL J STREET ADDRESS 300 PHILLIPI ROAD CITY-ST-ZIP COLUMBUS OH 43228-0512	☐ Delete	TITLE PDC NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE VP NAME WATTS, L M STREET ADDRESS 300 PHILLIPI RD CITY-ST-ZIP COLUMBUS OH 43228	☐ Delete	TITLE VP, Tax NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE SVP NAME WAITE, BRAD A STREET ADDRESS 300 PHILLIPI RD CITY-ST-ZIP COLUMBUS OH 43228-0512	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: L Michael Watts L. MICHAEL WATTS VICE PRESIDENT, TAX 4/17/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)