

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

2

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **F94000000243 (5)**

1. Corporation Name
AGRESERVES, INC.

95 JAN 24 AM 9:39

Principal Place of Business Mailing Address
139 E. SOUTH TEMPLE #110 **139 E. SOUTH TEMPLE #110**
SALT LAKE CITY UT 84111-1103 **SALT LAKE CITY UT 84111-1103**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		01/19/1994			
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 City & State		28 City & State		87-0481574		Not Applicable	
24 Zip		29 Country		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
25		30		<input type="checkbox"/>		\$5.00 May Be Added to Fees	
				6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>	
				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GENHO, PAUL 13754 DESERT LANE ST CLOUD FL 34773-9381				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				13754 Desert Lane			
				84 City			
				FL 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CREER, JOHN W	1.2 NAME	
STREET ADDRESS	139 EAST SOUTH TEMPLE, STE 110	1.3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMOREAUX, ROBERT D	2.2 NAME	
STREET ADDRESS	139 EAST SOUTH TEMPLE, STE 110	2.3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COWAN, ROBERT L	3.2 NAME	
STREET ADDRESS	139 EAST SOUTH TEMPLE, STE 110	3.3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KEELER, KARL F	4.2 NAME	
STREET ADDRESS	139 EAST SOUTH TEMPLE, STE 110	4.3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNG, KENNETH R	5.2 NAME	
STREET ADDRESS	139 EAST SOUTH TEMPLE, STE 110	5.3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIMMONS, TED D	6.2 NAME	
STREET ADDRESS	50 EAST NORTH TEMPLE, 11TH FLOOR	6.3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(j), 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: Charles R. Whipple 1/17/95 801-359-1600
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIFY OFFICER OR DIRECTOR
 Charles R. Whipple

OFFICERS

Vice-President	Charles R. Whipple	139 East South Temple, Suite 110
Secretary-Treasurer		Salt Lake City, Utah 84111-1103
Vice-President	Martin J. Wistisen	P. O. Box 2308
		Tri-Cities, WA 99302

BOARD OF DIRECTORS

Chairman	Merrill J. Bateman	50 East North Temple, 18th Floor
		Salt Lake City, Utah 84150
	Richard C. Edgley	50 East North Temple, 18th Floor
		Salt Lake City, Utah 84150
	Donald A. Staheli	277 Park Avenue, 50th Floor
		New York City, New York 10172
	Wayne G. Facer	Eagle Gate Building, 7th Floor
		Salt Lake City, Utah 84111
	Keith B. McMullin	50 East North Temple, 7th Floor
		Salt Lake City, Utah 84150