

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000243

FILED
Feb 05, 2008
Secretary of State

Entity Name: AGRESERVES, INC.

Current Principal Place of Business:

139 E. SOUTH TEMPLE #110
SALT LAKE CITY, UT 841111103

New Principal Place of Business:

Current Mailing Address:

50 E. NORTH TEMPLE 2WW
SALT LAKE CITY, UT 84150

New Mailing Address:

FEI Number: 87-0481574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GENHO, PAUL C
Address: 139 EAST SOUTH TEMPLE, STE 110
City-St-Zip: SALT LAKE CITY, UT 84111

Title: V () Delete
Name: LAMOREAU, ROBERT D
Address: 139 EAST SOUTH TEMPLE, STE 110
City-St-Zip: SALT LAKE CITY, UT 84111

Title: D () Delete
Name: SLEIGHT, DON M
Address: 139 EAST SOUTH TEMPLE, STE 110
City-St-Zip: SALT LAKE CITY, UT 84111

Title: VTS () Delete
Name: JONES, CASEY O
Address: 139 E SOUTH TEMPLE #110
City-St-Zip: SALT LAKE CITY, UT 84111

Title: D () Delete
Name: JACOBSEN, ERIC
Address: 139 E SOUTH TEMPLE #110
City-St-Zip: SALT LAKE CITY, UT 84111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: LAMBERT, GLEN L
Address: 139 EAST SOUTH TEMPLE, STE 110
City-St-Zip: SALT LAKE CITY, UT 84111

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVTS (X) Change () Addition
Name: JONES, CASEY O
Address: 139 E SOUTH TEMPLE #110
City-St-Zip: SALT LAKE CITY, UT 84111

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CASEY O. JONES

_____ Electronic Signature of Signing Officer or Director

DVST

02/05/2008

_____ Date