

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

FILED
Apr 14 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 # F94000002259 (9)

1. Corporation Name
BUSH BOAKE ALLEN INC.



Principal Place of Business 7 MERCEDES DR. MONTVALE NJ 07645	Mailing Address 7 MERCEDES DR. MONTVALE NJ 07645
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/02/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-2560391	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
23	Zip	28	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	Country	29	Country	30	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. 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
				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 <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOYDEN, JULIAN W	1.2 NAME	
STREET ADDRESS	815 SUSSEX ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FRANKLIN LAKES NJ	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNLEA, JOHN	2.2 NAME	
STREET ADDRESS	15A NASSIM RD. 01-05 NASSIM PARK	2.3 STREET ADDRESS	
CITY-ST-ZIP	SINGAPORE FL	2.4 CITY-ST-ZIP	SINGAPORE, SINGAPORE
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, FRED W	3.2 NAME	
STREET ADDRESS	11 BENJAMIN COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	WOODCLIFF LAKE NJ	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARDS, BRUCE J	4.2 NAME	
STREET ADDRESS	E TITHE BARN CHURCH END FELMERSHAM	4.3 STREET ADDRESS	
CITY-ST-ZIP	BEDFORDSHIRE EN	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNDSON, JAMES H	5.2 NAME	
STREET ADDRESS	53 HOLDEN WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	UPMNSTER ES	5.4 CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEANY, DENNIS M	6.2 NAME	
STREET ADDRESS	39 RODNEY STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	GLEN ROCK NJ	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 on an attachment with an address.

SIGNATURE: *Fred W Brown*
 SIGNATURE AND TITLE OR PRINTER NAME OF SIGNING OFFICER OR DIRECTOR

3/6/98 (201) 782-3413

CR2E034 (10/97)