

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90056 023 ***150.00

DOCUMENT # F94000002259

1. Entity Name

BUSH BOAKE ALLEN INC.

Principal Place of Business

Mailing Address

7 MERCEDES DR.
 MONTVALE NJ 07645

7 MERCEDES DR.
 MONTVALE NJ 07645-1815

RUU11000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-2560391

Applied For

Not Applicable

Zip

Country

Zip

Country

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

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

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, 2000 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	PD	<input type="checkbox"/> Delete
NAME	BOYDEN, JULIAN W	
STREET ADDRESS	815 SUSSEX ROAD	
CITY-ST-ZIP	FRANKLIN LAKES NJ	
TITLE	V	<input type="checkbox"/> Delete
NAME	DUNLEA, JOHN	
STREET ADDRESS	15A NASSIM RD. 01-05 NASSIM PARK	
CITY-ST-ZIP	SINGAPORE SI	
TITLE	V	<input type="checkbox"/> Delete
NAME	BROWN, FRED W	
STREET ADDRESS	11 BENJAMIN COURT	
CITY-ST-ZIP	WOODCLIFF LAKE NJ	
TITLE	V	<input type="checkbox"/> Delete
NAME	EDWARDS, BRUCE J	
STREET ADDRESS	E TITHE BARN CHURCH END FELMERSHAM	
CITY-ST-ZIP	BEDFORDSHIRE EN	
TITLE	V	<input type="checkbox"/> Delete
NAME	DUNDSON, JAMES H	
STREET ADDRESS	53 HOLDEN WAY	
CITY-ST-ZIP	UPMINSTER ES	
TITLE	VS	<input type="checkbox"/> Delete
NAME	MEANY, DENNIS M	
STREET ADDRESS	39 RODNEY STREET	
CITY-ST-ZIP	GLEN ROCK NJ	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/00
 Date

(202) 782-3268
 Daytime Phone #