FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 8:46

DOCUMENT # P20982 (5)

1. Corporation Name
THE GRASS VALLEY GROUP, INC.

Principal Place of Business	Mailing Address
13024 BITNEY SPRINGS ROAD PO BOX 1114 (95945) NEVADA CITY CA 95959	13024 BITNEY SPRINGS ROAD PO BOX 1114 (95945) NEVADA CITY CA 95959

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/21/1988
3a. Date of Last Report: 04/21/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

4. FEI Number: 94-1452571 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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 _____ DATE
Signature, Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when manually filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP	11 TITLE		☒ Change ☐ Addition
NAME	~~KATSUDA, LEE~~	12 NAME	BRANNAN, PAUL	
STREET ADDRESS	13024 BITNEY SPRINGS RD	13 STREET ADDRESS		
CITY ST ZIP	NEVADA CITY CA	14 CITY ST ZIP		
TITLE	P	21 TITLE		☒ Change ☐ Addition
NAME	~~WILSON, ROBERT~~ L	22 NAME	CASTLES, DANIEL	
STREET ADDRESS	13024 BITNEY SPGS RD	23 STREET ADDRESS		
CITY ST ZIP	NEVADA CITY CA	24 CITY ST ZIP		
TITLE	S	31 TITLE		☐ Change ☐ Addition
NAME	LEWIS, EDWARD	32 NAME		
STREET ADDRESS	26600 SW PARKWAY	33 STREET ADDRESS		
CITY ST ZIP	WILSONVILLE OR	34 CITY ST ZIP		
TITLE	VP	41 TITLE		☐ Change ☐ Addition
NAME	ROCHE, TERRESA	42 NAME		
STREET ADDRESS	13024 BITNEY SPRINGS ROAD	43 STREET ADDRESS		
CITY ST ZIP	NEVADA CITY CA	44 CITY ST ZIP		
TITLE	VP	51 TITLE		☐ Change ☐ Addition
NAME	DOLE, LEONARD	52 NAME		
STREET ADDRESS	13024 BITNEY SPGS RD	53 STREET ADDRESS		
CITY ST ZIP	NEVADA CITY CA	54 CITY ST ZIP		
TITLE	D	61 TITLE		☒ Change ☐ Addition
NAME	~~VOGANY~~, DELBERT W.	62 NAME	YOCAM, DELBERT W.	
STREET ADDRESS	26600 SW PARKWAY	63 STREET ADDRESS		
CITY ST ZIP	WILSONVILLE OR	64 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 119.07(3)(k), 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: X Paul Brannan 3/31/95 (916) 878-3136
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0401030 FN