FIL	E	NOW:	FILING	FEE	AFTER	MAY	1	IS	\$225.	00
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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

199 7

DOCUMENT # P40638

(9)

**UMATILLA GROVES INCORPORATED** 

APPROVED AND FILED

1997 JUL 14 PM 12: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address								
W.EHCROKHEITATIVESK			ONE UPPER POND ROAD 10/EMBROX THAT HAVES C/O PARSIPPANY NJ 07054	GP	V Intern	ational, Inc.	2/20/98	<u>.</u>
	US c/o GPU Inter	nati	US			3. Date Incorporated or Qualified 09/15/1992	3a. Date of Last R. 95/01/19	•
2.	Principal Place of Business	24	, Mailing Address			4. FEI Number		oplied For
21		26				33-0560927		Not Applicable
22	Suite. Apt. #, etc.	27	Sulte. Apt. ₩, etc.			5. Certificate of Status Desired		Additional Required
23	City & State	28	City & State			Election Campaign Financing     Trust Fund Contribution		May Be I to Fees
24		29	30	ountry		This corporation has liability for in Florida Statutes     Yes		199.032,
	9. Name and Address of Currer	t Regi	stered Agent			10. Name and Address of New Ro	gistered Agent	
				81	Name			
	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD.			82	Street Address	s (P.O. Box Number is Not Acceptable		
	PLANTATION FL 33324			83				
				84	City		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	-			
	Signature: typed or phrited name of registered agent and title if applicable (NX	OTE PA	gistered Agent signatura	required when renetating: DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE		1.1 TITLE	VP Business Development Change K Addition
NAME .	LEVY, BRUCE L	1	1.2 NAME	Richard J. Guy Delete
STREET ADDRESS	ONE UPPER POND ROAD	. 1	1.3 STREET ADDRESS	One Upper Pond Koad
CITY-ST-ZIP	PARSIPPANY NJ 07054		1.4 CITY+ST-ZIP	Parsippany, NJ 07054
TITLE	V DELETE		2.1 TITLE	VP BUSINESS OPERATIONS XX Change Addition
NAME	BRAVER, DAVID C	1	2.2 NAME	John A. McTear Proj. Mgmt. & Tech
STREET ADDRESS	ONE UPPER POND ROAD	1	2.3 STREET ADDRESS	One Upper Pond Road Resources
CITY-ST-ZIP	PARSIPPANY NJ 07054	- Š.	24 CITY-ST-ZIP	Parsippany, NJ 07054
TITLE .	S DELETE	-1	3 1 TATLE	S Change & Addition
NAME	TOMBLIN, KELLY	1	3.2 NAME	Wendy S. Greengrove
STREET ADDRESS	ONE UPPER POND ROAD	4	3.3 STREET ADDRESS	One Upper Pond Road
CiTY - ST - ZIP	PARSIPPANY NJ 07054	ı	3 4 CITY-ST-ZIP	Parsippany, NJ 07054
TITLE	☐ DELETE	- (	4.1 TITLE	Executive Vice President Change Addition
NAME	9000022380597 -07/15/9701029001		42 NAME	Robert J. Neary
STREET ADDRESS	-07/15/9701029001		4.3 STREET ADDRESS	One Upper Pond Road
CITY-ST-ZIP	****225.00 ****225.00	1	4 4 City - St - ZIP	Parsipany, NJ 07054
TITLE	☐ DELETE	Ţ	5 1 TITLE	VP Business Management Change K Addition
NAME +	9000022380597	ı) I	5.2 NAME	Luis E. Tellez
STREET ADDRESS	9000022380597 -07/15/9701029002	1	5.3 STREET ADDRESS	One Upper Pond Road
CITY+ST-ZIP	****333.75 ****333.75	4	5.4 CITY-ST-ZIP	Parsippany, NJ 07054
TITLE	☐ DELETE	*1	6. 1 TITLE	☐ Change ☐ Addition
IAME		٠,	6.2 NAME	
STREET ADDRESS	•		6.3 STREET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CITY-ST-ZIP		- 1	64 CITY ST. 7IP	ار المار

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 cath; that I am an officer or director of the corporation or the repeiver 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 Menanged, or on an attachment with an address.

SIGNATURE:

Dedul Quecox

6/24/97

(201) 263-69 15

CR2E034 (12/95)