

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90183 011 ***150.00

DOCUMENT # 838029

i. Entity Name
AMDAHL CORPORATION

Principal Place of Business Mailing Address
 1250 E. ARQUES AVE., M/S 124 1250 E. ARQUES AVE., M/S 124
 CA 94086-5401 SUNNYVALE CA 94086-5401



DO NOT WRITE IN THIS SPACE

Principal Place of Business 3. Mailing Address
 1250 E. ARQUES AVE, M/S 124
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 P.O. BOX 3470

City & State City & State
 SUNNYVALE, CA

4. FEI Number Applied For
94-1728548 Not Applicable

Zip Country Zip Country
 94088-3470 USA

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

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
ST - ZIP	D LEWIS, JOHN C 1250 E ARQUES AVE SUNNYVALE CA 94088-3470	<input type="checkbox"/> Delete	TITLE: NAME STREET ADDRESS CITY-ST-ZIP SUNNYVALE, CA 94086-5401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
ST - ZIP	CP WRIGHT, DAVID B 1250 E ARQUES AVE SUNNYVALE CA 94088-3470	<input type="checkbox"/> Delete	TITLE: NAME STREET ADDRESS CITY-ST-ZIP SUNNYVALE, CA 94086-5401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
ST - ZIP	CTVP ANDERSON, DAVID 1250 E. ARQUES AVE. SUNNYVALE CA 94088-3470	<input type="checkbox"/> Delete	TITLE: NAME STREET ADDRESS CITY-ST-ZIP VICE-PRESIDENT AND TREASURER JAMES A. WENGLING SUNNYVALE, CA 94086-5401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
ST - ZIP	VP THOMPSON, ERNEST 1250 EAST ARQUES AVENUE SYNNYVALE FL 94088-3470	<input type="checkbox"/> Delete	TITLE: NAME STREET ADDRESS CITY-ST-ZIP SENIOR V.P. AND CHIEF FINANCIAL OFFICER WILLIAM R. MANSFIELD 1250 E. ARQUES AVE. SUNNYVALE, CA 94086 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
ST - ZIP	D HALLMAN, MICHAEL 1250 E ARQUES AVE SUNNYVALE CA 94088-3470	<input type="checkbox"/> Delete	TITLE: NAME STREET ADDRESS CITY-ST-ZIP SUNNYVALE, CA 94086 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
ST - ZIP	D SHAGAZIAR, MICHAEL B 1250 E ARQUES AVE SUNNYVALE CA 34088-3470	<input type="checkbox"/> Delete	TITLE: NAME STREET ADDRESS CITY-ST-ZIP DIRECTOR MICHAEL J. POEHNER 1200 MCWILL COLLEGE AVE, SUITE 2300 MONTREAL QUEBEC H3B 4G7 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: *James A Wengling* 05-01- 2000 408 746 7133

CR2E035 (9/99)