

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004999

FILED  
Jan 12, 2004  
Secretary of State

Entity Name: QUICKTURN DESIGN SYSTEMS, INC.

## Current Principal Place of Business:

2655 SEELY AVE.  
SAN JOSE, CA 95134

## New Principal Place of Business:

## Current Mailing Address:

2655 SEELY AVE.  
SAN JOSE, CA 95134

## New Mailing Address:

FEI Number: 77-0159619      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete  
Name: BINGHAM, H R  
Address: 2655 SEELY AVE  
City-St-Zip: SAN JOSE, CA 95134

Title: SVPC ( ) Delete  
Name: PORTER, WILLIAM  
Address: 2655 SEELY AVE.  
City-St-Zip: SAN JOSE, CA 95134

Title: S ( ) Delete  
Name: SMITH MCKEITHEN, R L  
Address: 2655 SEELY AVE.  
City-St-Zip: SAN JOSE, CA 95134

Title: D (X) Delete  
Name: BOSTROM, SUSAN  
Address: 2655 SEELY AVE  
City-St-Zip: SAN JOSE, CA 95134

Title: D (X) Delete  
Name: SCALISE, GEORGE M  
Address: 2655 SEELY AVE  
City-St-Zip: SAN JOSE, CA 95134

Title: D (X) Delete  
Name: LIU, LEONARD Y W  
Address: 2655 SEELY AVE.  
City-St-Zip: SAN JOSE, CA 95134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D CF (X) Change ( ) Addition  
Name: PORTER, WILLIAM  
Address: 2655 SEELY AVE.  
City-St-Zip: SAN JOSE, CA 95134

Title: S, D (X) Change ( ) Addition  
Name: SMITH MCKEITHEN, R L  
Address: 2655 SEELY AVE.  
City-St-Zip: SAN JOSE, CA 95134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R.L. SMITH MCKEITHEN

D, S

01/12/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date