

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 31 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F94000000997 (6)

1. Corporation Name

KLA INSTRUMENTS CORPORATION

Principal Place of Business

160 RIO ROBLES  
PO BOX 49055  
SAN JOSE CA 95161-9055

Mailing Address

160 RIO ROBLES  
PO BOX 49055  
SAN JOSE CA 95161-9055

3. Date Incorporated or Qualified

02/28/1994

3a. Date of Last Report

02/15/1996

4. FEI Number

04-2564110

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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 SOUTH 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE COB ☐ DELETE

NAME LEVY, KENNETH  
STREET ADDRESS 160 RIO ROBLES / BOX 49055  
CITY - ST - ZIP SAN JOSE CA 95161-9055

TITLE PCOO ☐ DELETE

NAME SCHROEDER, KENNETH L  
STREET ADDRESS 160 RIO ROBLES / BOX 49055  
CITY - ST - ZIP SAN JOSE CA 95161-9055

TITLE VCFO ☐ DELETE

NAME BOEHLKE, ROBERT J  
STREET ADDRESS 160 RIO ROBLES / BOX 49055  
CITY - ST - ZIP SAN JOSE CA 95161-9055

TITLE T ☐ DELETE

NAME STODDART, CHRISTOPHER  
STREET ADDRESS 160 RIO ROBLES  
CITY - ST - ZIP SAN JOSE CA

TITLE V ☐ DELETE

NAME SCHNITZER, ARTHUR P  
STREET ADDRESS 160 RIO ROBLES / BOX 49055  
CITY - ST - ZIP SAN JOSE CA 95161-9055

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)