

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000002992

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

Entity Name: SCIENTIFIC LEARNING CORPORATION

## Current Principal Place of Business:

300 FRANK H. OGAWA PLAZA  
SUITE 500  
OAKLAND, CA 946122040

## New Principal Place of Business:

## Current Mailing Address:

300 FRANK H. OGAWA PLAZA  
SUITE 500  
OAKLAND, CA 946122040

## New Mailing Address:

FEI Number: 94-3234458      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
526 E. PARK AVE.  
TALLAHASSEE, FL 32301      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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete  
Name: BOLTON, SHERYLE  
Address: 5576 GLENBROOK DR.  
City-St-Zip: OAKLAND, CA 94618

Title: D ( ) Delete  
Name: MERZENICH, MICHAEL DR.  
Address: 20 HILLPOINT  
City-St-Zip: SAN FRANCISCO, CA 94117

Title: D ( ) Delete  
Name: TALLAL, PAULA DR.  
Address: 197 UNIVERSITY AVE  
City-St-Zip: NEWARK, NJ 07102

Title: V ( ) Delete  
Name: JENKINS, WILLIAMS E DR.  
Address: 348 FARALLON AVE.  
City-St-Zip: PACIFICA, CA 94044

Title: V ( ) Delete  
Name: MILLER, STEVE DR.  
Address: 5 ELK CT.  
City-St-Zip: PACIFICA, CA 94044

Title: P ( ) Delete  
Name: MATTSON, FRANK  
Address: 1340 COLE STREET  
City-St-Zip: SAN FRANCISCO, CA 94117

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: FRANK MATTSON

P

04/25/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date

JANE A. FREEMAN, CFO  
10 EDGECROFT RD  
KENSINGTON, CA 94707