# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2007 8:00 am**
**Secretary of State**
04-30-2007 90429 039 ***150.00

DOCUMENT # F98000004690

1. Entity Name
QTERA CORPORATION

Principal Place of Business
2221 LAKESIDE BLVD.
RICHARDSON, TX 75082-4399

Mailing Address
4001 EAST CHAPEL HILL-NELSON HIGHWAY
RESEARCH TRIANGLE PARK, NC 27709

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

04172007 Chg-P CR2E034 (12/06)

4. FEI Number 23-2970251 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**
CT CORPORATION SYSTEM
1200 SOUTH 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

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2007 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

| | | |
|---|---|---|
| TITLE | VP | ☐ Delete |
| NAME | KREBS, LAURIE A | |
| STREET ADDRESS | 4001 E. CHAPEL HILL NELSON HWY. | |
| CITY-ST-ZIP | RESEARCH TRIANGLE PARK, NC 27709 | |
| TITLE | S | ☐ Delete |
| NAME | EGAN, LYNN C | |
| STREET ADDRESS | 200 ATHENS WAY | |
| CITY-ST-ZIP | NASHVILLE, TN 372281397 | |
| TITLE | AS | ☑ Delete |
| NAME | LOONEY, ROBERT J | |
| STREET ADDRESS | 200 ATHENS WAY | |
| CITY-ST-ZIP | NASHVILLE, TN 372281397 | |
| TITLE | PD | ☐ Delete |
| NAME | POE, KIMBERLY P | |
| STREET ADDRESS | 2370 PERFORMANCE DR | |
| CITY-ST-ZIP | RICHARDSON, TX 75082 | |
| TITLE | D | ☐ Delete |
| NAME | SLEDGE, KAREN E | |
| STREET ADDRESS | 2221 LAKESIDE BLVD | |
| CITY-ST-ZIP | RICHARDSON, TX 75082 | |
| TITLE | | ☐ Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

| | | |
|---|---|---|
| TITLE | | ☐ Change ☐ Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ Change ☐ Addition |
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| TITLE | | ☐ Change ☐ Addition |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Lauren C. Krebs — 4/26/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #