


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2008 8:00 am**  
**Secretary of State**

05-01-2008 90247 015 \*\*\*150.00

DOCUMENT # F98000005434

1. Entity Name  
 LAM RESEARCH CORPORATION



Principal Place of Business Mailing Address

% TAX DEPT. CA-4 % TAX DEPT. CA-4  
 4650 CUSHING PARKWAY 4650 CUSHING PARKWAY  
 FREMONT, CA 94538 FREMONT, CA 94538

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



04182008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For  
 94-2634797 Not Applicable

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

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCEO NEWBERRY, STEPHEN 4650 CUSHING PARKWAY FREMONT, CA 94538 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	ASSISTANT SECRETARY MICHELE IZOR 4650 CUSHING PARKWAY FREMONT, CA 94538 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO ANSTICE, MARTIN 4650 CUSHING PARKWAY FREMONT, CA 94538 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CC BAGLEY, JIM 4650 CUSHING PARKWAY FREMONT, CA 94538 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D INMAN, GRANT 4 ORINDA WAY, BLDG D, SUITE 150 ORINDA, CA 94563 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARSCOTT, DAVID G 1550 EL CAMINO REAL SUITE 275 MENLO PARK, CA 94025 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LE BLANC, ROCH 4650 CUSHING PARKWAY FREMONT, CA 94538 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  DATE: 4/28/08 DAYTIME PHONE #: (510) 572-0200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT  
40091636  
 #F98000005434

LAM RESEARCH CORPORATION  
 ADDITIONAL BOARD OF DIRECTORS & OFFICERS

Executive Officers

Last Name	First Name	Position	Business Address			
			Street Address	City	State	Zip Code
Bright	Nicolas J.	Sr. VP and GM, Global Products	4650 Cushing Parkway	Fremont	CA	94538
Schisler	George	Assistant Secretary	4650 Cushing Parkway	Fremont	CA	94538

Board of Directors

Last Name	First Name	Position	Business Address			
			Street Address	City	State	Zip Code
Berdahl, Ph.D.	Robert M.	Director	4650 Cushing Parkway	Fremont	CA	94538
Elkus Jr.	Richard J.	Director	4650 Cushing Parkway	Fremont	CA	94538
Harris	Jack R.	Director	4650 Cushing Parkway	Fremont	CA	94538
Watanabe	Seiichi	Director	4650 Cushing Parkway	Fremont	CA	94538
Lego	Catherine P.	Director	4650 Cushing Parkway	Fremont	CA	94538
Wolpert	Patricia S.	Director	4650 Cushing Parkway	Fremont	CA	94538