2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001446

Entity Name: RADISYS CORPORATION

FILED May 16, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	AWSON CRI O, OR 97124						
Current Mailing Address:				New Mailing Address:			
ATTN: TAX	AWSON CRI (DIRECTOR O, OR 97124						
FEI Number:	93-0945232	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Des	ired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
		CE COMPANY					
1201 HAYS STREET TALLAHASSEE, FL 323012525 US							
The above in the State		submits this statement for the	purpose o	f changing it	s registered	office or registered ager	nt, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent						Date	
Election Carr	npaign Financir	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	GROUT, SCO	SON CREEK PARKWAY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	•) Delete		Title:	,	X) Change ()Addition	
Name: Address:	HARPER, JUL 5445 NE DAW	IA 'SON CREEK PARKWAY		Name: Address:	BRONSON, BI 5445 NE DAW	KIAN /SON CREEK PARKWAY	
City-St-Zip:	HILLSBORO,	OR 97124		City-St-Zip:	HILLSBORO,	OR 97124	
Title:	,) Delete		Title:		X) Change () Addition	
Name: Address:	BRONSON, BI 5445 NE DAW	KIAN 'SON CREEK PARKWAY		Name: Address:	GIBSON, SCC 5445 NE DAW	/SON CREEK PARKWAY	
City-St-Zip:	HILLSBORO,	OR 97124		City-St-Zip:	HILLSBORO,	OR 97124	
Title:	,	() Delete		Title:	() Change () Addition	
Name: Address:	HARPER, JUL 5445 NE DAW	IA 'SON CREEK PARKWAY		Name: Address:			
City-St-Zip:	HILLSBORO,			City-St-Zip:			
Title:		() Delete		Title:	() Change () Addition	
Name: Address:	GIBSON, SCC 5445 NF DAM	ITT 'SON CREEK PKWY.		Name: Address:			
City-St-Zip:	HILLSBORO,			City-St-Zip:			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRIAN BRONSON CFO 05/16/2007