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**Feb 04 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 # P19162 (7)
1. Corporation Name
CLARIS CORPORATION



Principal Place of Business Mailing Address
5201 PATRICK HENRY DR. SANTA CLARA CA 95052-5168
5201 PATRICK HENRY DR. SANTA CLARA CA 95054-1164

3. Date Incorporated or Qualified **05/06/1988** 3a. Date of Last Report **01/30/1996**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30
4. FEI Number **68-0136717** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$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
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE LUCA, GUERRINO	1.2 NAME	
STREET ADDRESS	2070 PACIFIC AVENUE APT 705	1.3 STREET ADDRESS	
CITY - ST - ZIP	SAN FRANCISCO CA	1.4 CITY - ST - ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINSKY, ROBERTA	2.2 NAME	
STREET ADDRESS	14240 BARKSDALE COURT	2.3 STREET ADDRESS	
CITY - ST - ZIP	SARATOGA CA	2.4 CITY - ST - ZIP	
TITLE	SRVP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOUPIL, DOMINIQUE	3.2 NAME	
STREET ADDRESS	5933 CHABOLYN TERRACE	3.3 STREET ADDRESS	
CITY - ST - ZIP	OAKLAND CA	3.4 CITY - ST - ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	POLLOCK, STEVE	4.2 NAME	VP worldwide operations
STREET ADDRESS	895 TERRACE DRIVE	4.3 STREET ADDRESS	SCOTT LEWIS
CITY - ST - ZIP	LOS ALTOS CA	4.4 CITY - ST - ZIP	13316 Glen Brae Drive
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	CFO & VP Finance
STREET ADDRESS		5.3 STREET ADDRESS	Bill Epling
CITY - ST - ZIP		5.4 CITY - ST - ZIP	16252 Roseleaf Lane
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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]* **Bill Epling** Date: **408-987-7000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)