

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90052 019 \*\*\*150.00

**DOCUMENT # F01000005430**

1. Entity Name

CADENCE DESIGN FOUNDRY, INC.



Principal Place of Business

555 RIVER OAKS PARKWAY, BLDG. 4  
SAN JOSE CA 95134

Mailing Address

13221 SW 68TH PARKWAY  
SUITE 200  
PORTLAND OR 97223  
US

94043032



MOORE

CR2E034 (11/03)

2. Principal Place of Business

2655 Seely Avenue, Bldg.5

3. Mailing Address

2655 Seely Avenue, Bldg.5

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

San Jose, CA

City & State

San Jose, CA

4. FEI Number

77-0573594

Applied For

Not Applicable

Zip

95134

Country

Zip

95134

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T 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, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE Director, President ☐ Delete  
NAME PORTER, WILLIAM  
STREET ADDRESS 2655 SEELY AVENUE, BLDG 5  
CITY-ST-ZIP SAN JOSE CA 95134

TITLE Director, Secretary ☐ Delete  
NAME MCKEITHEN, R.L SMITH  
STREET ADDRESS 2655 SEELY AVE., BLDG 5  
CITY-ST-ZIP SAN JOSE CA 95134

TITLE Director, Treasurer ☐ Delete  
NAME ELDREDGE, CHARLES  
STREET ADDRESS 2655 SEELY AVE. BLDG 5  
CITY-ST-ZIP SAN JOSE CA 95134

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Assistant Secretary ☐ Change ☒ Addition  
NAME James J. Cowie  
STREET ADDRESS 2655 Seely Avenue, Bldg.5  
CITY-ST-ZIP San Jose, CA 95134

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

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

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

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

12. I 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 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:

*R.L. Smith McKeithen*

R.L. Smith McKeithen

02/27/04 (408) 576-3544

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #