2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003661

Entity Name: INTERSECT ENT, INC.

Current Principal Place of Business:

1555 ADAMS DRIVE MENLO PARK, CA 94025

Current Mailing Address:

1555 ADAMS DRIVE MENLO PARK, CA 94025

FEI Number: 20-0280837

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

FILED Feb 27, 2018

Secretary of State

CC6640219422

Date

Certificate of Status Desired: No

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.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	CFO	Title	CEO, DIRECTOR
Name	HILLEMAN, JERYL	Name	EARNHARDT, LISA
Address	1555 ADAMS DRIVE	Address	1555 ADAMS DRIVE
City-State-Zip:	MENLO PARK CA 94025	City-State-Zip:	MENLO PARK CA 94025
Title	DIRECTOR	Title	DIRECTOR
Name	MEAD, JR., DANA G	Name	MOLL, FREDERIC H
Address	1555 ADAMS DRIVE	Address	1555 ADAMS DRIVE
City-State-Zip:	MENLO PARK CA 94025	City-State-Zip:	MENLO PARK CA 94025
Title	CO0	Title	DIRECTOR
Title Name	COO KAUFMAN, RICHARD	Title Name	DIRECTOR GALLAHUE, KIERAN
Name	KAUFMAN, RICHARD 1555 ADAMS DRIVE	Name	GALLAHUE, KIERAN
Name Address	KAUFMAN, RICHARD 1555 ADAMS DRIVE	Name Address	GALLAHUE, KIERAN 1555 ADAMS DRIVE
Name Address City-State-Zip:	KAUFMAN, RICHARD 1555 ADAMS DRIVE MENLO PARK CA 94025	Name Address City-State-Zip:	GALLAHUE, KIERAN 1555 ADAMS DRIVE MENLO PARK CA 94025
Name Address City-State-Zip: Title	KAUFMAN, RICHARD 1555 ADAMS DRIVE MENLO PARK CA 94025 DIRECTOR	Name Address City-State-Zip: Title	GALLAHUE, KIERAN 1555 ADAMS DRIVE MENLO PARK CA 94025 DIRECTOR
Name Address City-State-Zip: Title Name	KAUFMAN, RICHARD 1555 ADAMS DRIVE MENLO PARK CA 94025 DIRECTOR LUCCHESE, CYNTHIA	Name Address City-State-Zip: Title Name	GALLAHUE, KIERAN 1555 ADAMS DRIVE MENLO PARK CA 94025 DIRECTOR VERNON, W ANTHONY

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: JERYL HILLEMAN

CFO

02/27/2018

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	SECRETARY	Title	CPO
Name	LEHMAN, DAVID	Name	CARSCADDEN, GWEN
Address	1555 ADAMS DRIVE	Address	1555 ADAMS DRIVE
City-State-Zip:	MENLO PARK CA 94025	City-State-Zip:	MENLO PARK CA 94025
Title	CHIEF BUSINESS OFFICER	Title	DIRECTOR
Title Name	CHIEF BUSINESS OFFICER PARKER, DRAKE	Title Name	DIRECTOR KLINE, TERESA L
Name	PARKER, DRAKE	Name	KLINE, TERESA L