

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001454

Entity Name: ZOOM VIDEO COMMUNICATIONS, INC.**Current Principal Place of Business:**55 ALMADEN BLVD. SUITE 600
SAN JOSE, CA 95113**Current Mailing Address:**691 S MILPITAS BLVD SUITE 212
MILPITAS, CA 95035 US**FEI Number:** 61-1648780**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORPORATING SERVICES LTD INC
1540 GLENWAY DR
TALLAHASSEE, FL 32301 US*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_____
Date**Officer/Director Detail :**

Title CEO, DIRECTOR
Name YUAN, ERIC S
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name MCDERMOTT, WILLIAM R
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name SCHEINMAN, DAN
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name HOOTS, CINDY
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name GASSNER, PETER
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name SUBOTOVSKY, SANTI
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title TREASURER
Name STECKELBERG, KELLY
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name CHADWICK, JONATHAN
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

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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: JEFFREY C TRUE**SECRETARY****04/25/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title SECRETARY
Name TRUE, JEFFREY C
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name MCMASTER, LIEUT. GEN. H.R.
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title DIRECTOR
Name NAPOLITANO, JANET
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113

Title CAO
Name CREHAN, SHANE
Address 55 ALMADEN BLVD. SUITE 600
City-State-Zip: SAN JOSE CA 95113