FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 3:23

DOCUMENT # 850943 (2)

1. Corporation Name

ZILOG, INC.

Principal Place of Business

210 HACIENDA AVE.
CAMPBELL CA 95008

Mailing Address

210 HACIENDA AVE.
CAMPBELL CA 95008

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/05/1981	3a. Date of Last Report: 06/28/1994
4. FEI Number: 13-3092996	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc	27 Suite, Apt. # etc
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 ______ DATE

12. OFFICERS AND DIRECTORS

Field	Entry
TITLE	PD
NAME	SACK, EDGAR A
STREET ADDRESS	210 HACIENDA AVENUE
CITY ST ZIP	CAMPBELL CA
TITLE	S
NAME	PICKARD, RICHARD R.
STREET ADDRESS	210 HACIENDA AVENUE
CITY ST ZIP	CAMPBELL CA
TITLE	D
NAME	JANEWAY, WILLIAM H.
STREET ADDRESS	466 LEXINGTON AVE.
CITY ST ZIP	NEW YORK NY
TITLE	D
NAME	KRESSEL, HENRY
STREET ADDRESS	466 LEXINGTON AVE.
CITY ST ZIP	NEW YORK NY
TITLE	D
NAME	CONNORS, THOMAS J.
STREET ADDRESS	6270 EAST PHELPS ROAD
CITY ST ZIP	SCOTTSDALE AZ
TITLE	V
NAME	WALKER, WILLIAM R
STREET ADDRESS	210 HACIENDA AVE
CITY ST ZIP	CAMPBELL CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Blocks 1–6: TITLE, NAME, STREET ADDRESS, CITY ST ZIP; ☐ Change ☐ Addition — blank)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 the 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: W R Walker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/13/95 Daytime Phone: 408/370-8648

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