

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90180 009 \*\*\*158.75

**DOCUMENT # F00000001803**

1. Entity Name  
**TRILOGY SOFTWARE, INC.**



Principal Place of Business  
**901 104TH AVE NE  
200  
BELLEVUE WA 98004**

Mailing Address  
**901 104TH AVE NE  
200  
BELLEVUE WA 98004**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **33-0522209**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOLM, BOB  
950 N. COLLIER BLVD., STE 426  
MARCO ISLAND FL 34145**

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, 2003 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P EBSTYNE, DOUG 901 104TH AVE NE #200 BELLEVUE WA 98004</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V HIGGINS, RONALD 901 104TH AVE NE #200 BELLEVUE WA 98004</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BLUHM, DAVID 901 104TH AVE NE #200 BELLEVUE WA 98004</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST HOLM, BOB 950 N COLLIER BLVD., STE 426 MARCO ISLAND FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D TYSON, JOHN 5480 REED ST. ARVADA CO</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED SHEETS</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/11/03 (425) 709-2900**  
Date Daytime Phone #

CR2E034 (10/02)

● Attachment ●

10076892

#F0000000/803

**COMPANY OFFICERS**

Douglass Ebstyne  
President & CEO  
901 104<sup>th</sup> Ave NE, Suite 200  
Bellevue, WA

Thomas Phillips  
VP, Sales  
901 104<sup>th</sup> Ave NE, Suite 200  
Bellevue, WA 98004

Robert Bingham  
VP, Marketing  
901 104<sup>th</sup> Ave NE, Suite 200  
Bellevue, WA-98004

Robert Holm  
VP, Technical Services  
901 104<sup>th</sup> Ave NE, Suite 200  
Bellevue, WA 98004

Brian Henling  
VP, Engineering  
901 104<sup>th</sup> Ave NE, Suite 200  
Bellevue, WA 98004

James Newkirk\*  
VP, Finance & Administration  
\* Treasurer  
\* Assistant-Secretary  
901 104<sup>th</sup> Ave NE, Suite 200  
Bellevue, WA 98004

Patrick Schultheis  
Secretary  
Wilson, Sonsini, Goodrich & Rosati  
5300 Carillon Point  
Kirkland, WA 98033

Christian Montegut  
Assistant-Secretary  
Wilson, Sonsini, Goodrich & Rosati  
5300 Carillon Point  
Kirkland, WA 98033

Attachment

1007-6892

# F0000000 1803

**BOARD OF DIRECTORS**

Douglass Ebstyne  
Chairman  
901 104th Avenue NE, Suite 200  
Bellevue, WA 98004

Todd Jacques-Fissori  
Member  
Boulder Venture Partners  
44 Montgomery Street, Suite 3800  
San Francisco, CA 94104

Mark Mecham  
Member  
Northwest Venture Associates  
221 North Wall Street, Suite 628  
Spokane, WA 99201

Vijay Vashee  
Member  
7439 W Mercer Way  
Mercer Island, WA 98040