

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003731

FILED  
Feb 02, 2012  
Secretary of State

Entity Name: CYMER, INC.

**Current Principal Place of Business:**

17075 THORN MINT CT.  
SAN DIEGO, CA 92127

**New Principal Place of Business:**

**Current Mailing Address:**

17075 THORN MINT CT.  
ATTN: TAX DEPT  
SAN DIEGO, CA 92127

**New Mailing Address:**

FEI Number: 33-0175463      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: AKINS, ROBERT P  
Address: 17075 THORN MINT CT.  
City-St-Zip: SAN DIEGO, CA 92127

Title: PCOO  
Name: BROWN, EDWARD J  
Address: 17075 THORN MINT CT.  
City-St-Zip: SAN DIEGO, CA 92127

Title: VP  
Name: SANDSTROM, RICHARD L  
Address: 17075 THORN MINT CT.  
City-St-Zip: SAN DIEGO, CA 92127

Title: VP  
Name: PARTLO, WILLIAM  
Address: 17075 THORN MINT CT.  
City-St-Zip: SAN DIEGO, CA 92127

Title: CFO  
Name: BOWMAN, PAUL B  
Address: 17075 THORN MINT CT.  
City-St-Zip: SAN DIEGO, CA 92127

Title: VP  
Name: MCGINNIS, KAREN K  
Address: 17075 THORN MINT CT.  
City-St-Zip: SAN DIEGO, CA 92127

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: PAUL BOWMAN

CFO

02/02/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date