2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F0000004419 1. Entity Name

SIGNATURE.

BRIDGESPAN CORP.

Principal Place of Business

2. Principal Place of Business

Mailing Address

3. Mailing Address

2440 WEST EL CAMINO REAL. SUITE 112 MOUNTAIN VIEW CA 94040

2440 WEST EL CAMINO REAL SUITE 112

MOUNTAIN VIEW CA 94040

| 1 (881)88 (11) 881)1 88111 88111 | # 2111 P 2111 # 42 11 # 40111 # 41# 1 | |
|----------------------------------|---|--|

| Z591 DALLAS PAR | | | | | | | |
|---|------------------------|----------------------------|--|-------------------------------|--|--|--|
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | DO NOT WRITE IN THIS SPACE | | | | | |
| City & State | City & State FRISCO TX | | 13 2133033 | Applied For Not Applicable | | | |
| Zip Country | Zip 75034 | Country USA | 5. Certificate of Status Desired | | | | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | | | |
| FRIEDMAN, MARTIN S ESQ. | | Name | | | | | |
| C/O ROSE, SUNDSTROM & BENTLEY, LLP | | Street Addres | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| 2548 BLAIRSTONE PINES DRIVE TALLAHASSEE FL 32303 | | | | | | | |
| | | City | FL Zip Co | ode | | | |

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.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00

(NOTE: Registered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

DATE

\$5.00 May Be Added to Fees

| (See criter | ria on back) | X | Make Check Payab | le to Departmen | t of State | Trust t and contribution. | - A0060 | 101663 |
|---------------------------------------|--|----------------|------------------|---------------------------------------|---------------------------------|---|-------------|------------|
| 11. | | ICERS AND DIRE | CTORS | 12. | AD | DITIONS/CHANGES TO OFFICERS A | ND DIRECTOR | S IN 11 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CEO EVANS, MARK 2440 WEST EL CAMIN MOUNTAIN VIEW CA | - | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | FRISCO | 00DY GLLAS PARKWAY #600 Tx 75034 | Change . | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PCD KISHORE, NANDA 2440 WEST EL CAMIN MOUNTAIN VIEW CAS | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DAN 61 | PRESIDENT AUDRE AU ALLAS PARKWAY #60 TX 75034 | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST FELD, MARK 2440 WEST EL CAMIN MOUNTAIN VIEW CAS | - | Delete E 112 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2541 D | ciry/Treasurer Deavel Millas Parkway #600 Tx 75034 | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS JORGENSEN, MICHEL 2440 WEST EL CAMIN MOUNTAIN VIEW CAS | IO REAL, SUITI | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ASST. S. CHRISTUR 2591 DA | ecretury pher J. Mylucas ollas parkway #600 TX 75034 | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS MILLER, KEITH 2440 WEST EL CAMIN MOUNTAIN VIEW CAS | • | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition |

13. 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 triskee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of of the corporation or the receiver or t changed, or on an attachment with a

SIGNATURE

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO