

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90069 032 ***150.00

DOCUMENT # F00000005084

1. Entity Name

TALITY CORPORATION

C0029168



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**2655 SEELY ROAD, BUILDING 9
SAN JOSE CA 95134**

Mailing Address
**2655 SEELY ROAD, BUILDING 9
SAN JOSE CA 95134**

2. Principal Place of Business
555 River Oaks Pkwy

3. Mailing Address
13221 SW 68th Pkwy Ste 200

Suite, Apt. #, etc.
Bldg 3

Suite, Apt. #, etc.
A#N. MACurrier

City & State
San Jose CA

City & State
Portland OR

Zip
95134

Country
USA

Zip
97223

Country
USA

4. FEI Number
77-0548279

Applied For
☐

Not Applicable
☐

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NATIONAL CORPORATE RESEARCH, LTD.
1406 HAYS STREET, SUITE #2
TALLAHASSEE FL 32301**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WIDERHOLD, ROBERT P 2655 SEELY ROAD, BUILDING 9 SAN JOSE CA 95134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BELL, DUANE W 2655 SEELY ROAD, BUILDING 9 SAN JOSE CA 95134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BINGHAM, H. RAYMOND 2655 SEELY ROAD, BUILDING 9 SAN JOSE CA 95134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRIS, RONALD R 2655 SEELY ROAD, BUILDING 9 SAN JOSE CA 95134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 555 River Oaks Pkwy Bldg 3 San Jose CA 95134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 555 River Oaks Pkwy Bldg 3 San Jose CA 95134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 555 River Oaks Pkwy Bldg 3 San Jose CA 95134
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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

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Duane W. Bell** **DUANE W. BELL** **2/14/01** **408-943-1234**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)