

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 12, 2002 8:00 am
Secretary of State

08-12-2002 90009 034 ***558.75

DOCUMENT # F00000006864

1. Entity Name
LEXAR MEDIA, INC

Principal Place of Business
**47421 BAYSIDE PARKWAY
 FREMONT CA 94538**

Mailing Address
**47421 BAYSIDE PARKWAY
 FREMONT CA 94538**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **33-0723123**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

**CORPORATE ACCESS INC.
 263 EAST 6TH AVENUE
 TALLAHASSEE FL 32303**

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
**VCD
 ESTAKHRI, PETRO
 47421 BAYSIDE PARKWAY
 FREMONT CA 94538** ☐ Delete

TITLE →
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CHIEF TECH. OFFICER, VP. ENGINEERING & DIRECTOR
 ESTAKHRI, PETRO
 47421 Bayside Parkway
 Fremont CA 94538** ☒ Change ☐ Addition (VP/D)

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PD
 REIMER, JOHN H
 47421 BAYSIDE PARKWAY
 FREMONT CA 94538** ☐ Delete

TITLE →
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DIRECTOR (D) ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DCOO
 STANG, ERIC B
 47421 BAYSIDE PARKWAY
 FREMONT CA 94538** ☐ Delete

TITLE —
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
President, CEO, DIRECTOR (P/D) CEO ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VCFO
 BISSINGER, RONALD H
 47421 BAYSIDE PARKWAY
 FREMONT CA 94538** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CFD, VP
 Michael Perez
 47421 Bayside Parkway
 Fremont, CA 94538** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**S
 WHITAKER, ERIC S
 47421 BAYSIDE PARKWAY
 FREMONT CA 94538** ☐ Delete

TITLE —
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
General Counsel, VP. Licensing, Secretary (VP/S) ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 DODDS, WILLIAM T
 47421 BAYSIDE PARKWAY
 FREMONT CA 94538** ☐ 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 26 2002 (510) 413-1200

Date

Daytime Phone #

CR2E034 (4/02)