

**2008 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2008 08:00 AM
Secretary of State

DOCUMENT # F01000000147 1. Entity Name PACKETEER, INC.	
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Principal Place of Business 10201 N. DE ANZA BLVD. CUPERTINO, CA 95014	Mailing Address 10201 N. DE ANZA BLVD. CUPERTINO, CA 95014
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DO NOT WRITE IN THIS SPACE



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number 77-0420107	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
STE #4 (LEON CTY)
WESTON, FL 33331**

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO COTE, DAVE 10201 N. DE ANZA BLVD. CUPERTINO, CA 95014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOS YNTEMA, DAVID 10201 N. DE ANZA BLVD. CUPERTINO, CA 95014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELLIOT, CRAIG 10201 N DE ANZA BLVD CUPERTINO, CA 95014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO FREITAS, MANUEL 10201 N. DE ANZA BLVD. CUPERTINO, CA 95014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VE NELU, MIAHI 10201 N. DEANZA BLVD CUPERTINO, CA 95014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VHR PAPPAS, GREG 10201 N DEANZA BLVD. CUPERTINO, CA 95014

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: David Yntema **1/4/08** **(408) 873-4400**

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