

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # F01000000519**

1. Entity Name

VENTURE ACQUISITION COMPANY (DELAWARE)



Principal Place of Business

50 WEST SAN FERNANDO STREET  
SAN JOSE, CA 95113 US

Mailing Address

50 WEST SAN FERNANDO STREET  
SAN JOSE, CA 95113 US

**DO NOT WRITE IN THIS SPACE**



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number  
77-0557971

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000154519  
05/04/04-80170-012 150.00

10. OFFICERS AND DIRECTORS

TITLE PC  
NAME CARTWRIGHT, PETER  
STREET ADDRESS 50 W. SAN FERNANDO STREET  
CITY-ST-ZIP SAN JOSE, CA 95113

TITLE EVPS  
NAME CURTIS, ANN B  
STREET ADDRESS 50 W. SAN FERNANDO STREET  
CITY-ST-ZIP SAN JOSE, CA 95113

TITLE EVP  
NAME MASON, THOMAS R  
STREET ADDRESS 50 W. SAN FERNANDO STREET  
CITY-ST-ZIP SAN JOSE, CA 95113

TITLE EVP  
NAME KELLY, ROBERT D  
STREET ADDRESS 50 W. SAN FERNANDO STREET  
CITY-ST-ZIP SAN JOSE, CA 95113

TITLE VP  
NAME BARNETT, PAUL  
STREET ADDRESS 50 W. SAN FERNANDO STREET  
CITY-ST-ZIP SAN JOSE, CA 95113

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gustavo Grunbaum, Assistant Secretary

4/22/2004