

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90143 017 ***150.00

DOCUMENT # F01000003106

1. Entity Name
CAMSTAR SYSTEMS, INC.



Principal Place of Business
**2815 COLISEUM CENTRE DR
SUITE 600
CHARLOTTE, NC 28217**

Mailing Address
**2815 COLISEUM CENTRE DR
SUITE 600
CHARLOTTE, NC 28217**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04062006

Chg-P

CR2E034 (11/05)

4. FEI Number
94-2996486

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CONE, JAMES D
13055 LA VISTA DRIVE
SARATOGA, CA 95070** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SCFO
DARIOUSH, MARDAN
7 MAHOGANY DRIVE
IRVINE, CA 92620** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
EARHART, HOWARD
477 N. MATHILDA AVENUE
SUNNYVALE, CA 94086** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SMITH, BRIAN
2400 SAND HILL ROAD, #100
MENLO PARK, CA 94025** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WADSWORTH, ROBERT
ONE FINANCIAL CENTER, 44TH FLOOR
BOSTON, MA 02111** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JOHNSON, MICHAEL
19200 VON KARMAN AVENUE
IRVINE, CA 926121540** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Kendall Cooper
1656 N. California Blvd. #300
Walnut, CA 94596** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
Scott O. Toney
2815 Coliseum Centre Dr. #600
Charlotte, NC 28217** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott O. Toney

Date

Daytime Phone #

4/7/06

(704) 227-6600