2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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Apr 09, 2004 8:00 am Secretary of State DOCUMENT # F01000005329 1. Entity Name 04-09-2004 90055 009 ***150.00 KYPHON INC. Principal Place of Business Mailing Address 1350 BORDEAUX DRIVE 1350 BORDEAUX DRIVE SUNNYVALE, CA 94089 SUNNYVALE, CA 94089 2. Principal Place of Business 3. Mailing Address 1221 CROSSMAN 1221 CROSSMAN AVE Suite, Apt. #, etc. Suite, Apt. #, etc. 03312004 CR2E034 (10/03) Cha-P City & State City & State 4. EEI Number Applied For CA SUNNYVALE SUNNYVALE CA 77-0366069 Not Applicable Zip Country . Country \$8.75 Additional 5. Certificate of Status Desired USA 94089 USA 94089 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY= Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City 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. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS ☐ Addition TITLE ☐ Delete TITLE NAME MOTT, RICHARD W NAME 1221 CROSSHAN AVE STREET ADDRESS STREET ADDRESS 1350 BORDEAUX DR. SUNNYVALE CA 94089 CITY-ST-7IE SUNNYVALE, CA 94089 CITY-ST-ZIP VD Change ☐ Addition TITLE ☐ Delete TITLE NAME TALMADGE, KAREN D NAME 1221 CROSSMAN AVE 1350 BORDEAUX DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNNYVALE, CA 94089 CITY-ST-ZIP SUNNYVALE, CA 94089 VCEO TITLE ☐ Delete TITLE Change ■ Addition KAISER, JEFFREY L NAME NAME 1221-CROSSMAN_AVE 1350 BORDEAUX DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNNYVALE, CA 94089 CITY-ST-ZIP SUNNYVALE, CA 94089 Delete SECRETARY ☐ Change Addition TITLE TITI F DAVID SHAW NAME MARQUARDT, ALAN NAME 1221 CROSSMAN AVE STREET ADDRESS 1350 BORDEAUX DRIVE STREET ADDRESS SUMMYUALE, CA 94089 CITY-ST-ZIP CITY-ST-ZIP SUNNYVALE, CA 94089 Change ☐ Addition TITLE ☐ Delete TITLE TRACY, JULIE NAME NAME 1221 CROSSMAN AUE 1350 BORDEAUX DR. STREET ADDRESS STREET ADDRESS SUNNWALE, CA 94089 CITY-ST-ZIP SUNNYVALE, CA 94089 CITY-ST-ZIP THChange ☐ Addition TITLE ☐ Delete TITLE RECUPERO, ANTHONY J NAME NAME 1221 CROSSNAN AVE STREET ADDRESS 1350 BORDEAUX DRIVE STREET ADDRESS SUNNYVALE, OA 94089 CITY-ST-ZIP SUNNYVALE, CA 94089 CITY-ST-ZIP 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.

NING OFFICER OR DIRECTOR

FILED

408-548-6500

Daytime Phone #

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