

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001523

FILED
Jan 12, 2009
Secretary of State

Entity Name: LINEAR TECHNOLOGY CORPORATION

Current Principal Place of Business:

1630 MCCARTHY BOULEVARD
MILPITAS, CA 95035

New Principal Place of Business:

Current Mailing Address:

1630 MCCARTHY BOULEVARD
MILPITAS, CA 95035

New Mailing Address:

FEI Number: 94-2778785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: MAIER, LOTHAR
Address: 1630 MCCARTHY BOULEVARD
City-St-Zip: MILPITAS, CA 95035

Title: CFO () Delete
Name: COGHLAN, PAUL
Address: 1630 MCCARTHY BOULEVARD
City-St-Zip: MILPITAS, CA 95035

Title: V () Delete
Name: DOBKIN, ROBERT
Address: 1630 MCCARTHY BOULEVARD
City-St-Zip: MILPITAS, CA 95035

Title: COO () Delete
Name: MCCANN, ALEXANDER
Address: 1630 MCCARTHY BOULEVARD
City-St-Zip: MILPITAS, CA 95035

Title: V () Delete
Name: NICKSON, RICHARD
Address: 1630 MCCARTHY BOULEVARD
City-St-Zip: MILPITAS, CA 95035

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: SWANSON, JR, ROBERT H
Address: 1630 MCCARTHY BOULEVARD
City-St-Zip: MILPITAS, CA 95035

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL COGHLAN

CFO

01/12/2009

Electronic Signature of Signing Officer or Director

Date