

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001938

FILED
Jan 08, 2008
Secretary of State

Entity Name: METRON TECHNOLOGY DISTRIBUTION CORPORATION

Current Principal Place of Business:

3050 BOWERS AVE.
MS 2033
SANTA CLARA, CA 95054

New Principal Place of Business:

Current Mailing Address:

3050 BOWERS AVENUE
MS 2033
SANTA CLARA, CA 95054

New Mailing Address:

FEI Number: 77-0267793 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: P () Delete
Name: KERSCHBAUM, MANFRED
Address: 3050 BOWERS AVENUE, MS 2033
City-St-Zip: SANTA CLARA, CA 95054

Title: CFO () Delete
Name: GAMMON, GARRY B
Address: 3050 BOWERS AVENUE, MS 2033
City-St-Zip: SANTA CLARA, CA 95054

Title: D () Delete
Name: SWEENEY, JOSEPH
Address: 3050 BOWERS AVENUE, MS 2033
City-St-Zip: SANTA CLARA, CA 95054

Title: D () Delete
Name: FINSTERBUSCH, WERNER
Address: 3050 BOWERS AVENUE, MS 2033
City-St-Zip: SANTA CLARA, CA 95054

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:

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: GARRY BRENT GAMMON

CFO

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date