


# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F02000004126	
1. Entity Name Intraspect Software, Inc.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 8000 Marina Blvd.	3. Mailing Address 8000 Marina Blvd.
Suite, Apt. #, etc. Suite 200	Suite, Apt. #, etc. Suite 200
City & State Brisbane, CA	City & State Brisbane, CA
Zip 94005	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 77-0411459		Applied For Not Applicable
	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name Corporation Service Company		
Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street			
City Tallahassee, FL Zip Code 32301			

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.

600022966676

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President and CEO Ben Barnes 8000 Marina Blvd. Suite 200 Brisbane, CA 94005	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO Stacey Soper 8000 Marina Blvd. Suite 200 Brisbane, CA 94005	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Joseph Moran 8000 Marina Blvd. Suite 200 Brisbane, CA 94005	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph A. Moran Date: 9/9/03 Daytime Phone #: 650-246-5313

CR2E034B (12/02)



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 236099 7346346

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 558.75

ORDER DATE : September 9, 2003

ORDER TIME : 8:39 AM

ORDER NO. : 236099-005

CUSTOMER NO: 7346346

CUSTOMER: Nerissa Canonizado  
Intraspect Software, Inc.  
Suite 200  
8000 Marina Boulevard  
Brisbane, CA 94005

RECEIVED  
03 SEP 11 AM 10:46  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: INTRASPECT SOFTWARE, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull - Ext. 1115

EXAMINER'S INITIALS: \_\_\_\_\_