

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2004 8:00 am
Secretary of State

08-17-2004 90002 016 ***550.00

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1. Entity Name
TRACER NET CORPORATION



Principal Place of Business
**14301-G SULLYFIELD CIRCLE
CHANTILLY, CA 20151**

Mailing Address
**14301-G SULLYFIELD CIRCLE
CHANTILLY, CA 20151**

2. Principal Place of Business

3. Mailing Address

PO BOX 3642

Suite, Apt. #, etc.

Suite, Apt. #, etc.

ATTN: TAX DEPT B7

City & State

City & State

SUNNYVALE, CA

Zip

Country

Zip

Country

94088

USA

08102004

Chg-P

CR2E034 (10/03)

4. FEI Number

54-1792670

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

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 \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME
P BEYER, RICHARD A ☒ Delete
STREET ADDRESS
14301-G SULLYFIELD CIRCLE
CITY-ST-ZIP
CHANTILLY, CA 20151

TITLE NAME
S MCDONALD, WESLEY E ☒ Delete
STREET ADDRESS
14301-G SULLYFIELD CIRCLE
CITY-ST-ZIP
CHANTILLY, CA 20151

TITLE NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME
PRESIDENT STEVEN W. BERGLUND ☐ Change ☒ Addition
STREET ADDRESS
749 N. MARY AVE.
CITY-ST-ZIP
SUNNYVALE, CA 94085

TITLE NAME
VP, ASST SECRETARY, CFO MARY ELLEN GENOVESE ☐ Change ☒ Addition
STREET ADDRESS
749 N. MARY AVE.
CITY-ST-ZIP
SUNNYVALE, CA 94085

TITLE NAME
VP, SECRETARY IRWIN KWATEK ☐ Change ☒ Addition
STREET ADDRESS
749 N. MARY AVE.
CITY-ST-ZIP
SUNNYVALE, CA 94085

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

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

TITLE NAME
☐ Change ☐ Addition
STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/10/04 (408) 481-2273
Date Daytime Phone #