

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003336

FILED  
Jan 23, 2006  
Secretary of State

Entity Name: NETWORK GENERAL CORPORATION

## Current Principal Place of Business:

178 EAST TASMAN DRIVE  
SAN JOSE, CA 95134

## New Principal Place of Business:

## Current Mailing Address:

178 EAST TASMAN DRIVE  
SAN JOSE, CA 95134

## New Mailing Address:

FEI Number: 80-0105898

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: D ( ) Delete  
Name: FRANTZ, EUGENE J  
Address: 345 CALIFORNIA ST, STE 3300  
City-St-Zip: SAN FRANCISCO, CA 94104

Title: S ( ) Delete  
Name: ROBERT, SCHLOSSMAN  
Address: 178 EAST TASMAN DRIVE  
City-St-Zip: SAN JOSE, CA 95134

Title: P ( ) Delete  
Name: POPE, MICHAEL W  
Address: 178 EAST TASMAN DRIVE  
City-St-Zip: SAN JOSE, CA 95134

Title: EVP ( ) Delete  
Name: FLATLEY, JAMES  
Address: 178 EAST TASMAN DRIVE  
City-St-Zip: SAN JOSE, CA 95134

Title: D ( ) Delete  
Name: TAYLOR, BRIAN  
Address: 345 CALIFORNIA ST, STE 3300  
City-St-Zip: SAN FRANCISCO, CA 94104

Title: T ( ) Delete  
Name: WHITE, STUART  
Address: 178 EAST TASMAN DRIVE  
City-St-Zip: SAN JOSE, CA 95134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT SCHLOSSMAN

S

01/23/2006

Electronic Signature of Signing Officer or Director

Date