## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000004575

**Entity Name: EMETER CORPORATION** 

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
ONE TWIN DOLPHIN DRIVE REDWOOD CITY, CA 94065				2215 BRIDGEPOINTE PARKWAY SUITE 300 SAN MATEO, CA 94404			
Current Mailing Address:				New Mailing Address:			
ONE TWIN DOLPHIN DRIVE REDWOOD CITY, CA 94065				2215 BRIDGEPOINTE PARKWAY SUITE 300 SAN MATEO, CA 94404			
FEI Number: 94-3319481 FEI Number Applied For ( ) F		FEI Nun	lumber Not Applicable ( ) Certificate		Certificate of Status Des	te of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1201 HAYS TALLAHAS The above in the State	SEE, FL 3230 named entity su of Florida.		ırpose o	of changing it	ts registered of	ffice or registered agel	nt, or both,
SIGNATUR		Signature of Registered Agen	<del></del>			Data	
Flection Cam		Signature of Registered Agent Trust Fund Contribution ( ).	IL			Date	
		( )		ADDITION	O COLLANGEO	TO OFFICERS AND I	DIDECTOR
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEO () I EDWARDS, CRE ONE TWIN DOLF REDWOOD CITY	PHIN DRIVE		Title: Name: Address: City-St-Zip:	EDWARDS, CR	OINTE PARKWAY #300	
Title: Name: Address: City-St-Zip:	P ()[ JOHNSON, LARS ONE TWIN DOLF REDWOOD CITY	PHIN DRIVE		Title: Name: Address: City-St-Zip:	JOHNSON, LAR	OINTE PARKWAY #300	
Title: Name: Address: City-St-Zip:	O () Delete KING, CHRIS ONE TWIN DOLPHIN DRIVE REDWOOD CITY, CA 94065			Title: Name: Address: City-St-Zip:	O (X) Change ( ) Addition KING, CHRIS 2215 BRIDGEPOINTE PARKWAY #300 SAN MATEO, CA 94404		
Title: Name: Address: City-St-Zip:		H, JOHN O Name: WAMBAUGH, JOH			OINTE PARKWAY #300		
Title: Name: Address: City-St-Zip:	V () [ SMITH, ELISA W ONE TWIN DOLF REDWOOD CITY	PHIN DRIVE		Title: Name: Address: City-St-Zip:	SMITH, ELISA V	OINTE PARKWAY #300	

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: ELISA W. SMITH VP 04/28/2008