


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90389 044 ***150.00

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| DOCUMENT # F04000007299 | | | |  | |
| 1. Entity Name TRANSDYN, INC. | | | | | |
| Principal Place of Business 5669 GIBRALTAR DRIVE PLEASANTON, CA 94588 | | | Mailing Address 5669 GIBRALTAR DRIVE PLEASANTON, CA 94588 | | |
| 2. Principal Place of Business - No P.O. Box # 4256 Hacienda Drive. | | 3. Mailing Address 4256 Hacienda Drive | | | |
| Suite, Apt. #, etc. 100 | | Suite, Apt. #, etc. 100 | | | |
| City & State Pleasanton, CA 94588 | | City & State Pleasanton, CA | | | |
| Zip 94588 | | Country U.S.A. | | 4. FEI Number 68-0312720 | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | Applied For <input type="checkbox"/> Not Applicable | | | |
| 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 | | | 7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CD POWELL, THOMAS W 8550 MOSLEY DRIVE HOUSTON, TX 77075 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Asst. Secretary Joanne E. Hill 4256 Hacienda Drive, Suite 100 Pleasanton, CA 94588 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD MADISON, DON R 8550 MOSLEY DRIVE HOUSTON, TX 77075 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Asst. Secretary Anandhi Vijanderan 4256 Hacienda Drive, Suite 100, Pleasanton CA 94588. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P DIMLICH, DAVID J 5669 GIBRALTAR DRIVE PLEASANTON, CA 94588 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 4256 Hacienda Drive, Suite 100 Pleasanton, CA 94588 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP LUIZ, BRIAN E 5669 GIBRALTAR DRIVE PLEASANTON, CA 94588 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 4256 Hacienda Drive, Suite 100 Pleasanton, CA 94588 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP MCPHARLIN, THOMAS P 5669 GIBRALTAR DRIVE PLEASANTON, CA 94588 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 4256 Hacienda Drive, Suite 100 Pleasanton, CA 94588 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP THOMPSON, G. MARCUS JR. 5669 GIBRALTAR DRIVE PLEASANTON, CA 94588 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2855 Premier Parkway, Suite F Duluth, GA 30097 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ | | Joanne E. Hill, Asst. Secretary | | 04/21/2008 (925) 225 1600 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date | | Daytime Phone # | |