

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003529

FILED
Jan 27, 2009
Secretary of State

Entity Name: ELECTRO SCIENTIFIC INDUSTRIES, INC.

Current Principal Place of Business:

13900 NW SCIENCE PARK DR
PORTLAND, OR 97229

New Principal Place of Business:

Current Mailing Address:

13900 NW SCIENCE PARK DR
PORTLAND, OR 97229

New Mailing Address:

FEI Number: 93-0370304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: C () Delete
Name: TOMPKINS, JON D
Address: 13900 NW SCIENCE PARK DR
City-St-Zip: PORTLAND, OR 97229

Title: D () Delete
Name: BALL, FREDERICK A
Address: 13900 NW SCIENCE PARK DR
City-St-Zip: PORTLAND, OR 97229

Title: D () Delete
Name: FAUBERT, RICHARD J
Address: 13900 NW SCIENCE PARK DR
City-St-Zip: PORTLAND, OR 97229

Title: P () Delete
Name: KONIDARIS, NICK
Address: 13900 NW SCIENCE PARK DR
City-St-Zip: PORTLAND, OR 97229

Title: V () Delete
Name: OLDHAM, PAUL
Address: 13900 NW SCIENCE PARK DRIVE
City-St-Zip: PORTLAND, OR 97229

Title: () Delete
Name:
Address:
City-St-Zip:

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: V () Change (X) Addition
Name: MUSTOE, KERRY
Address: 13900 NW SCIENCE PARK DRIVE
City-St-Zip: PORTLAND, OR 97229

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: KERRY MUSTOE

V

01/27/2009

Electronic Signature of Signing Officer or Director

Date