## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

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SCIENTIFIC-ATLANTA PRIVATE NETWORKS, INC.

## Principal Place of Business Mailing Address 420 N WICKHAM ROAD C/O SCIENTIFIC-ATLANTA, INC CORP. TAX DEPT., 1 TECHNOLOGY PKWY 8 CORP. TAX DEPT.. 1 TECHNOLOGY PKWY S MELBOURNE FL 32935 NORCROSS GA 30092-2967 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 06/25/1982 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2202543 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change TITLE 11TITLE STEINER GEORGE A 1.2 NAME CRNEG34 NAME ONE TECHNOLOGY PARKWAY SO STREET ADDRESS 1.3 STREET ADDRESS **NORCROSS GA** CITY-ST-ZIP 1.4 CITY-ST-ZIP X DELETE ☐ Addition 21 TITLE TITLE WAGNER CHRISTOPHER A 22 NAME NAME ONE TECHNOLOGY PKWY S 2.3 STREET ADDRESS STREET ADDRESS **NORCROSS GA** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE EIDSON, JULIAN W. 3.2 NAME NAME ONE TECHNOLOGY PKWY S STREET ADDRESS 3.3 STREET ADORESS **NORCROSS GA** CITY-ST-ZIP 34. CITY-ST-ZIP Addition DELETE Change 4,1 TITLE TITLE EASON JR WILLIAM E 4. 2 NAME NAME **ONE TECHNOLOGY PARKWAY SO** 4.3 STREET ADDRESS STREET ADDRESS **NORCROSS GA** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE GIFFORD, ANITA S NAME 5.2 NAME ONE TECHNOLOGY PARKWAY SOUTH STREET ADDRESS 5.3 STREET ADDRESS NORCROSS GA CITY-ST-2IP 54 CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

George A. Steiner

14. 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 annual report or supplemental annual 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 tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attagrimment with an address.

3/15/98

770-903-4645

**FILED** 

Mar 18 1998 8:00am

Secretary of State