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

Mailing Address

PROFIT
CORPORATION
ANNUAL REPORT
1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000004663 (1)

INTERNATIONAL NETWORK SERVICES, INCORPORATED

1213 INNSBRUCK DRIVE SUNNYVALE CA 94089 US		P.O. BOX 62409 SUNNYVALE CA 94088-2409 US			Date Incorporated or Qualified	3a. Dai	le of La	ast Report		
i					10/15/1993 04/16/1996					
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	, , <del>, , , ,</del>	7	Applied For		
21		26						Not Applicable		
Suite, Apt.	#, elc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	6	City & State	City & State			6. Election Campaign Financing				
23		28	<del> </del>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Countr	У		8. This corporation has liability for in		ax und		
24 25 29 29 9, Name and Address of Current Registered Agent			30			Florida Statutes X Yes No  10. Name and Address of New Registered Agent				
		iΤ	Name	10, Name and Address of New Heg	STETEG A	gent				
C. T. CORPORATION SYSTEM 1200 SOUTH PINE										
	ND ROAD		82 Street Add		Street Addre	Idress (P.O. Box Number is Not Acceptable)				
	NTATION FL 33324		83							
'0"	TIMION IE GOOET				71°			11"		
_			84	•	City		FL	85	Zip Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the above	70-	named corpo	pration submits this statement for the pu	rpose of	changi	ng its registered	
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										
Signature, typed or printed name of registered agent and title II applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12									TODO 11.10	
TITLE	PD	DELETE	1.1 TITLE		11/			Char		
NAME	MCKINNEY, DONALD K.		1.2 NAME		0/	nairman and Director		<u></u> 01.a.	igo L. Francisco	
ACC ALADER ADDED ALIER ACC			1.3 STREE	T AI	IDDRESS 12	1213 Innsbruck Drive				
CITY-ST-ZIP	MOUNTAIN VIEW CA		1.4 CITY-			innyvale, CA 94089			_	
TITLE			2.1 TITLE			L Cha			nge Addition	
NAME	LAUGHLIN, KEVIN J.		22 NAME			,				
STREET ADDRESS	650 CASTRO STREET, STE 26	0	23 STREE	T A	DDRESS 121	3 Innsbruck Drive				
CITY-ST-ZIP	MOUNTAIN VIEW CA		2 4 CHY-	\$T	-zip <b>Su</b>	innyvale, on 94089				
TITLE	D AND COOK A SECULOR	☐ DELETE	3 1 11111		Pre	innyvale, CA 94089 esident and Director	- [	Char	nge Addition	
NAME	ANDERSON, VERNON 25225 LA LOMA DRIVE		3 2 NAME		40	hn Drew				
STREET ADDRESS CITY-ST-ZIP	LOS ALTOS HILLS CA		3 3 STHEE		DDRESS 124	3 Innsbruck Drive	•			
TITLE	D THE CON	DELETE	3.4. CHY- 4.1 TITLE	51.		innyvale, CA 94089		Char	nge Addition	
NAME	CARLICK, DAVID		4. 2 NAME	-	50	isistant Secretary san Hovatter Thornton	-		igo (EE) ricomon	
STREET ADDRESS	840 WESTRIDGE DR.		4.3 S18EE		DDRESS 12/	3 Innsbruck Drive	7			
CITY-ST-ZIP	PORTOLA VALLEY CA		4.4 City-	st.	.ZIP 3	unnyvale, ca 94089				
TITLE	D	☐ DELETE	5.1 TITLE		D	rector	I	Char	nge Addition	
NAME	FINCH, LAWRENCE G.		5.2 NAME		Dog	unlas Allred				
STREET ADDRESS	21884 SAND HILL RD., SUITE	121	5.3 STRFE	I AI	DDRESS 2	28 W. Tasman Drive				
CITY-ST-ZIP	MENLO PARK CA		5.4 CITY-	ST-	ZIP S	an Jose, CA 95134				
TITLE	D DOUGLAG	DELETE	6.1 TITLE				l	Char	nge L Addition	
NAME :	LEONE, DOUGLAS	AAA	6.2 NAME							
STREET ADDRESS	3000 SAND HILL RD., BLDG. 4	, 51E. 280	6.3 STREE	1 AI	DDRESS					

14. I do 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 trustee 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 attachment with an address.