2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F9400001777



FILED Mar 27, 2006 8:00 am Secretary of State 03-27-2006 90283 010 ***150.00

1. Entity Name NETWORK EQUIPMENT TECHNOLOGIES, INC.									
Principal Place of Business		Mailing Address			6	COACT	777		
6900 PASEO PADRE PKWY FREMONT, CA 94555 US		6900 PASEO PADRE PKWY FREMONT, CA 94555 US			4 1884188 1118 18	84th 81811 8814 8813 886	II GG IN GG (G) 110	(£ 4 86]] (£84 1 18	18 Marc 14 18 Marc
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01172006	Chg-P	CR2E0	34 (11/05)	
City & State		City & State			4. FEI Number 94-2904	044		_ 	plied For t Applicable
Zip	Country	Zip	Country			Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Current F	Registered Agent	Name		7. Name and A	ddress of New R	egistered A	gent	
PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS ST., #105 TALLAHASSEE, FL 32301			Street A	Street Address (P.O. Box Number is Not Acceptable)					
			City				FL	Zip Code	9
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							DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campai Trust Fund Contr			00 May Be ed to Fees				
10.	OFFICERS AND		11.	1	ADDITIONS/C	HANGES TO OFF	ICERS AND		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	DP WHYTE, HUBERT A 6900 PASEO PADRE PKWY FREMONT, CA 94555	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SLATTERY, FRANK 6900 PASEO PADRE PARKWAY FREMONT, CA 94555	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	AS VOGELSANG, RUTH M 6900 PASEO PADRE PKWY FREMONT, CA 94555	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAUBE, DAVID R 6900 PASEO PADRE PKWY FREMONT, CA 94555	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOLL, DIXON R 6900 PASEO PADRE PKWY FREMONT, CA 94555	☐ Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEATING, C. NICHOLAS 6900 PASEO PADRE PKWY FREMONT, CA 94555	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KEA 690 FR	TING, C. D PASED EMDNT,	NICHOLAS PADRE T CA 945.	X Y	Change	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.									

SIGN	ATU	IRE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 Nacl 6086

Date 500 174 4196