

FILED
Jul 01, 2003 8:00 am
Secretary of State

07-01-2003 90082 001 *1,100.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F94000001777

1. Entity Name
NETWORK EQUIPMENT TECHNOLOGIES, INC.



Principal Place of Business
6900 PASEO PADRE PKWY
FREMONT, CA 94555 US

Mailing Address
6900 PASEO PADRE PKWY
FREMONT, CA 94555 US

55050363



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-2904044

Applied For

Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST., #105
TALLAHASSEE, FL 32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DP
WHYTE, HUBERT A
6900 PASEO PADRE PKWY
FREMONT, CA 94555 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
VS
BATTY, JOHN C
6900 PASEO PADRE PKWY
FREMONT, CA 94555 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
AS
VOGELSANG, RUTH M
6900 PASEO PADRE PKWY
FREMONT, CA 94555 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
DUTTON, JAMES K.
6530 PASEO PADRE PARKWAY
FREMONT, CA 94555 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
DOLL, DIXON R
6900 PASEO PADRE PKWY
FREMONT, CA 94555 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
LAUBE, DAVID R
6900 PASEO PADRE PKWY
FREMONT, CA 94555 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
KEATING, C. NICHOLAS
6900 PASEO PADRE PKWY
FREMONT, CA 94555 ☐ Change ☒ Addition

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)