

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000002279

FILED  
Apr 07, 2003  
Secretary of State

Entity Name: VERITAS SOFTWARE GLOBAL CORPORATION

## Current Principal Place of Business:

350 ELLIS ST  
P.O. BOX 7011  
MOUNTAIN VIEW, CA 94043 US

## New Principal Place of Business:

## Current Mailing Address:

8300 BOONE BLVD., STE 700  
ATTN: GOVERNMENT BUSINESS OPERATIONS  
VIENNA, VA 22182 US

## New Mailing Address:

FEI Number: 59-2878624      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES INC.  
3953 W.W. KELLEY ROAD  
TALLAHASSEE, FL 32311 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: CEOP ( ) Delete  
Name: BLOOM, GARY  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: V ( ) Delete  
Name: SALLABERRY, PAUL  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: CFOD ( ) Delete  
Name: LONCHAR, KENNETH  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: VC ( ) Delete  
Name: SQUIRE, GEOFFREY W  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: T ( ) Delete  
Name: OLSON, KEVIN  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: S ( ) Delete  
Name: JONES, JAY  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CFOD (X) Change ( ) Addition  
Name: GILLIS, EDWIN  
Address: 350 ELLIS ST  
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAY JONES

S

04/07/2003

Electronic Signature of Signing Officer or Director

Date