FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000001964 (4)**

1. Corporation Name

ONSTREAM NETWORKS, INC.

Principal Place of Business	Mailing Address
3393 OCTAVIUS DR. SANTA CLARA CA 95054	3393 OCTAVIUS DR. SANTA CLARA CA 95054

3. Date Incorporated or Qualified: **04/21/1995**
3a. Date of Last Report:

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25):

2a. Mailing Address (26): Suite, Apt. # etc. (27): City & State (28): Zip (29): Country (30):

4. FEI Number: **77-0230176** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LINN, DWIGHT
1561 S. CONGRESS AVE., #253
DELRAY BEACH FL 33445

10. Name and Address of New Registered Agent

81 Name: COX, JERRY
82 Street Address (P.O. Box Number is Not Acceptable): 2031 NORTH POINT ALEXIS
83:
84 City: TARPON SPRINGS **FL** 85 Zip Code: 34689

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: Jerry L. Cox — JERRY COX, AREA SALES DIRECTOR — DATE: 4/19/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	V	☐ Change ☒ Addition
NAME	MONGIELLO, JAMES		1.2 NAME	YATES, DAVID	
STREET ADDRESS	47066 PALO AMARILLO		1.3 STREET ADDRESS	157 CALIFORNIA AVE # H204	
CITY-ST-ZIP	FREMONT CA 94539		1.4 CITY-ST-ZIP	PALO ALTO, CA 94306	
TITLE	V	☒ DELETE	2.1 TITLE	V	☐ Change ☒ Addition
NAME	STIEHLER, ROBERT M		2.2 NAME	PRAISNER, JAN A.	
STREET ADDRESS	40335 IMPERIO PLACE		2.3 STREET ADDRESS	220 ERICA WAY	
CITY-ST-ZIP	FREMONT CA 94539		2.4 CITY-ST-ZIP	PORTOLA VALLEY, CA 94028	
TITLE	S	☐ DELETE	3.1 TITLE	V	☐ Change ☒ Addition
NAME	BLAWIE, ELIAS J		3.2 NAME	LIEBOWITZ, PETER B.	
STREET ADDRESS	2800 SAND HILL RD.		3.3 STREET ADDRESS	16988 BRIERLY CT.	
CITY-ST-ZIP	MENLO PARK CA 94025		3.4 CITY-ST-ZIP	CASTRO VALLEY, CA 94546	
TITLE	V	☐ DELETE	4.1 TITLE	V	☐ Change ☒ Addition
NAME	KOENIG, KENNETH		4.2 NAME	FINDE, ROBERT A.	
STREET ADDRESS	13071 PIERCE RD.		4.3 STREET ADDRESS	1389 PRITCHETT CT.	
CITY-ST-ZIP	SARATOGA CA 95070		4.4 CITY-ST-ZIP	LOS ALTOS, CA 94024	
TITLE	D	☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	COXE, TENCH		5.2 NAME	GOULD, KATHRYN C.	
STREET ADDRESS	755 PAGE MILL PLACE, #A-200		5.3 STREET ADDRESS	75 WILLOW ROAD, SUITE 103	
CITY-ST-ZIP	PALO ALTO CA 94304		5.4 CITY-ST-ZIP	MENLO PARK, CA 94025	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	FLUEGEL, FREDERICK K		6.2 NAME		
STREET ADDRESS	2500 SAND HILL RD., #113		6.3 STREET ADDRESS		
CITY-ST-ZIP	MENLO PARK CA 94025		6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Jan Praisner — JAN A. PRAISNER — (408) 727-4545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #