

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

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000003087 (2)**

1. Corporation Name
SIERRA NETWORKS, INC.

Principal Place of Business
**485 CAYUGA RD.
BUFFALO NY 14225**

Mailing Address
**485 CAYUGA RD.
BUFFALO NY 14225**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/26/1995

4. FEI Number
16-1482451

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 owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BUCK, JOHN F
485 CAYUGA ROAD
BUFFALO NY** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BOYLE, RICHARD
6110 BLUE CIRCLE DR
MINNETONKA MN** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
MILLER, JEFFREY P
485 CAYUGA RD
BUFFALO NY 14225** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ASD
FLEMING, NED N III
600 NORTH PEARL ST., SUITE 2160
DALLAS TX 75201** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROSE, EDWARD W III
500 CRESCENT CT., SUITE 250
DALLAS TX 75201** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PAYNE, MARSHALL B III
500 CRESCENT CT., SUITE 250
DALLAS TX 75201** ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
**CEOC
GERO, JAMES F.
11900 NORTH ANNA CADE ROAD
ROCKWALL TX 75087** ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
**S
DALEY, THOMAS F.
485 CAYUGA ROAD
BUFFALO NY 14225** ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. 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 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:

Jeffrey P. Miller 2/19/98 (716)631-6357

CR2E034 (10/97)