

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Jul 29 1998 8:00am  
Secretary of State

DOCUMENT # F95000003143 (3)  
1. Corporation Name

THE VANTIVE CORPORATION



Principal Place of Business  
2455 AUGUSTINE DR., #101  
SANTA CLARA CA 95054

Mailing Address  
2455 AUGUSTINE DR., #101  
SANTA CLARA CA 95054

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/29/1995

4. FEI Number

77-0266662

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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 PCEO ☐ DELETE

NAME LUONGO, JOHN R  
STREET ADDRESS 2455 AUGUSTINE DRIVE  
CITY-ST-ZIP SANTA CLARA CA 95054

TITLE COO ☐ DELETE

NAME JACK, JOHN M  
STREET ADDRESS 2455 AUGUSTINE DRIVE  
CITY-ST-ZIP SANTA CLARA CA 95054

TITLE CFO ☒ DELETE

NAME MURPHY, KATHLEEN A  
STREET ADDRESS 2455 AUGUSTINE DRIVE  
CITY-ST-ZIP SANTA CLARA CA 95054

TITLE EVP ☒ DELETE

NAME LOCKHEAD, CHRISTOPHER W  
STREET ADDRESS 2455 AUGUSTINE DRIVE  
CITY-ST-ZIP SANTA CLARA CA 95054

TITLE VPP ☐ DELETE

NAME LOO, MICHAEL M  
STREET ADDRESS 2455 AUGUSTINE DRIVE  
CITY-ST-ZIP SANTA CLARA CA 95054

TITLE D ☒ DELETE

NAME SIPPL, ROGER J  
STREET ADDRESS 951 MARINER'S ISLAND BLVD., SUITE 460  
CITY-ST-ZIP SAN MATEO CA 94404

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V.P. & General Counsel ☐ Change ☒ Addition

1.2 NAME David Schellhase  
1.3 STREET ADDRESS 2455 Augustine Dr.  
1.4 CITY-ST-ZIP Santa Clara, CA 95054

2.1 TITLE CMO ☐ Change ☒ Addition

2.2 NAME Phil Dunkelberger  
2.3 STREET ADDRESS 2455 Augustine Dr.  
2.4 CITY-ST-ZIP Santa Clara, CA 95054

3.1 TITLE Director ☐ Change ☒ Addition

3.2 NAME Bill Davidow  
3.3 STREET ADDRESS 3000 Sand Hill Rd., Bldg. 1, Ste. 240  
3.4 CITY-ST-ZIP Menlo Park, CA 94025

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

NOT REQUIRED

15-246-98

408 367 4435

CR2E034 (5/98)