

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # F95000003762**

1. Entity Name

**COMMUNICATIONS & POWER INDUSTRIES, INC.**

Principal Place of Business

**607 HANSEN WAY  
PALO ALTO CA 94304**

Mailing Address

**607 HANSEN WAY  
PALO ALTO CA 94304  
US**

2. Principal Place of Business

**811 Hansen Way**

Suite, Apt. #, etc.

3. Mailing Address

**811 Hansen Way**

Suite, Apt. #, etc.

City & State  
**Palo Alto, CA**City & State  
**Palo Alto, CA**Zip  
**94303**Country  
**USA**Zip  
**94303**Country  
**USA**4. FEI Number **77-0405693**Applied For  
☐ Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPAMERICA, INC.  
1525 SOUTH ANDREWS AVE.  
STE. 216  
FT. LAUDERDALE FL 33316**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CEO  
PETRINI, BART F  
607 HANSEN WAY  
PALO ALTO CA 94303** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GREEN, LEONARD I  
11111 SANTA MONICA BLVD  
LOS ANGELES CA** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
DANHAKL, JOHN G.  
11111 SANTA MONICA BLVD  
LOS ANGELES CA** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ANNICK, GREGORY J  
11111 SANTA MONICA BLVD  
LOS ANGELES CA** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST  
HARVEY, LYNN  
607 HANSEN WAY  
PALO ALTO CA 94304** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CFO  
HARVEY, LYNN  
607 HANSEN WAY  
PALO ALTO CA 94304** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**311 Hansen Way** ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**811 Hansen Way  
Palo Alto, CA 94303** ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**811 Hansen Way  
Palo Alto, CA 94303** ☒ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Lynn E. Harvey**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/01

Date

650-846-3641

Daytime Phone #



DO NOT WRITE IN THIS SPACE

0696539

CR2E034 (10/00)

**FILED**  
**Apr 02, 2001 8:00 am**  
**Secretary of State**

04-02-2001 90310 032 \*\*\*150.00