## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 27, 2006 8:00 am **Secretary of State** DOCUMENT # F95000005497 02-27-2006 90072 011 \*\*\*150.00 FLEXTRONICS USA, INC. Principal Place of Business new; Mailing Address new: 305 Interlocken Parkway 305 Interlocken Parkway Broomfield; CO 80021 Broomfield, CO, 80021 1. P. 1. 2. Principal Place of Business 3. Mailing Address 305 Interlocken Parkusu 305 enterlocken Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Sity & State Broomfield, City & State Applied For 4. FEI Number 16-1318758 Broomfield Not Applicable Country \$8,75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ■ Addition MCNAMARA, MICHAEL NAME NAME STREET ADDRESS 2090 FORTUNE DR. STREET ADDRESS CITY-ST-ZIP SAN JOSE CA 95131 CITY-ST-ZIP TITLE DCFO Delete TITLE ☐ Addition Change NAME SMACH, THOMAS NAME STREET ADDRESS 2090 FORTUNE DR. STREET ADDRESS CITY-ST-ZIP SAN JOSE CA 95131 CITY-ST-ZIP THIF ☐ Delete TITLE ☐ Addition NAME STANDLEY, DONALD NAME STREET ADDRESS STREET ADDRESS 6328 MONARCH PARK PLACE CITY-ST-ZIP **NIWOT CO 80503** CITY-ST-ZIF Detete ☐ Change ☐ Addition READ, PAUL STREET ADDRESS 2090 FORTUNE DR. STREET ADDRESS SAN JOSE CA 95131 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition STEWART, TIMOTHY NAME NAME 2090 FORTUNE DR. STREET ADDRESS STREET ADDRESS SAN JOSE CA 95131 CITY-ST-ZIP CITY-ST-ZIP AS ☐ Defete TITLE Change ☐ Addition TITLE COLLIER, CHRIS NAME NAME 2090 FORTUNE DR. STREET ADDRESS STREET ADDRESS SAN JOSE CA 95131 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Stewart

FILED