

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

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Apr 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000005943 (4)

1. Corporation Name
FORE SYSTEMS, INC.

Principal Place of Business 174 THORN HILL ROAD WARRENDALE PA 15086-7586	Mailing Address 174 THORN HILL ROAD WARRENDALE PA 15086-7528
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2. Principal Place of Business 21 1000 FORE Drive Suite, Apt. #, etc.		2a. Mailing Address 26 1000 FORE Drive Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/06/1995	3a. Date of Last Report 07/30/1996
22 City & State 23 Warrendale PA		27 City & State 28 Warrendale PA		4. FEI Number 25-1628117	Applied For Not Applicable
24 15086 25 Country		29 15086 30 Country		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Warrendale PA		28 Warrendale PA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 15086 25 Country		29 15086 30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE CD / CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME BAKER, JOHN C.		1.2 NAME Cooper, Eric C.	
STREET ADDRESS 575 MADISON AVENUE		1.3 STREET ADDRESS 1000 FORE Drive	
CITY-ST-ZIP NEW YORK NY		1.4 CITY-ST-ZIP Warrendale, PA 15086	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CROTTY, THOMAS J.		2.2 NAME Crotty, Thomas J.	
STREET ADDRESS 200 PORTLAND STREET		2.3 STREET ADDRESS 20 William Street	
CITY-ST-ZIP BOSTON MA		2.4 CITY-ST-ZIP Wellesley, MA 02181	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME ARCHULETA, GEORGE		3.2 NAME Meneilciagli, Onat	
STREET ADDRESS 951 CHARLES HILL ROAD		3.3 STREET ADDRESS 1000 FORE Drive	
CITY-ST-ZIP SCOTTS VALLEY CA		3.4 CITY-ST-ZIP Warrendale, PA 15086	
TITLE VSD	<input type="checkbox"/> DELETE	4.1 TITLE V / D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SANSOM, ROBERT D		4.2 NAME Bitz, Francois J.	
STREET ADDRESS 174 THORN HILL ROAD		4.3 STREET ADDRESS 1000 FORE Drive	
CITY-ST-ZIP WARRENDALE PA 15086-7586		4.4 CITY-ST-ZIP Warrendale, PA 15086	
TITLE VCFO	<input type="checkbox"/> DELETE	5.1 TITLE V, CFO, COO, Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GILL, THOMAS J		5.2 NAME Gill, Thomas J.	
STREET ADDRESS 174 THORN HILL ROAD		5.3 STREET ADDRESS 1000 FORE Drive	
CITY-ST-ZIP WARRENDALE PA 15086-7586		5.4 CITY-ST-ZIP Warrendale, PA 15086	
TITLE V	<input type="checkbox"/> DELETE	6.1 TITLE V, S / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GREEN, MICHAEL I		6.2 NAME Sansom, Robert D.	
STREET ADDRESS 174 THORN HILL ROAD		6.3 STREET ADDRESS 1000 FORE Drive	
CITY-ST-ZIP WARRENDALE PA 15086-7586		6.4 CITY-ST-ZIP Warrendale, PA 15086	

14. I do 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, 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas J. Gill

3/21/97

(412) 742-7641