2000 UNIFORM BUSINESS REPORT (UBR)

May 05, 2000 8:00 am DOCUMENT # F9600001279 1. Entity Name Secretary of State ILLGEN SIMULATION TECHNOLOGIES, INC. 05-05-2000 90030 047 ***158.75 Mailing Address 130 ROBIN HILL ROAD. SUITE 200 130 ROBIN HILL ROAD, SUITE 200 GOLETA CA 93117 GOLETA CA 93117-3153 しいいいい エチャ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 77-0178186 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name F & L CORP Street Address (P.O. Box Number is Not Acceptable) THE GREENLEAF BUILDING 200 LAURA STREET., 3RD FLOOR JACKSONVILLE FL 32202-3527 Zin 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) ... FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change **X** Addition TITI F ☐ Delete WINGERLY, MICHAEL 130 ROBIN HILL PO, SUITE 200 NAME ILLGEN, JOHN D STREET ADDRESS STREET ADDRESS 130 ROBIN HILL ROAD, SUITE 200 GOLETA, CA CITY-ST-ZIP CITY-ST-ZIP GOLETA CA 93117 ☐ Change **Addition** TITI F ☐ Delete TITLE GOLOMB, SOLOMON NAME NAME GANTT: JARVIS 5354 LINDA VISTA DR STREET ADDRESS STREET ADDRESS 13117 HUMPHREY ST. CITYLIST, 7IP a Cawasa, Ca CITY-ST-ZIP **AUSTIN TX 78729** ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME HANISEE. ROBERT STREET ADDRESS STREET ADDRESS 865 S. FIGUEROA ST. CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90017 TITLE ☐ Delete Change Addition NAME ROBERTS, LARRY STREET ADDRESS STREET ADDRESS 3000 SAND HILL RD. BLDG: ONE, STE: 170 CITY-ST-ZIP CITY-ST-ZIP **MENLO PARK CA 94025** TITLE Delete ☐ Change Addition NAME PEASLAND, BRUCE R STREET ADDRESS STREET ADDRESS 130 ROBIN HILL ROAD, SUITE 200 CITY-ST-ZIP CITY-ST-ZIP GOLETA_CA 93117 TİTLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME GLEDHILL, DAVID W. STREET ADDRESS STREET ADDRESS 130 ROBIN HILL ROAD, SUITE 200 CITY-ST-ZIP CITY-ST-7IP GOLETA.CA 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 sther like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

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