

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  
Aug 19 1998 8:00am  
Secretary of State

DOCUMENT # **F96000001311 (7)**  
1. Corporation Name

**ASCEND COMMUNICATIONS, INC.**



Principal Place of Business  
**1701 HARBOR BAY PKWY.  
ALAMEDA CA 94502-3002  
US**

Mailing Address  
**1701 HARBOR BAY PKWY.  
ALAMEDA CA 94502-3002  
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

**03/01/1996**

4. FEI Number

**94-3092033**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$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

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
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 **PD** ☐ DELETE

NAME **EJABAT, MORY**  
STREET ADDRESS **1701 HARBOR BAY PKWY.**  
CITY-ST-ZIP **ALAMEDA CA**

TITLE **VSD** ☐ DELETE

NAME **DAHL, ROBERT K**  
STREET ADDRESS **1701 HARBOR BAY PKWY.**  
CITY-ST-ZIP **ALAMEDA CA**

TITLE **T** ☒ DELETE

NAME **JOHNSON, MICHAEL**  
STREET ADDRESS **1701 HARBOR BAY PKWY.**  
CITY-ST-ZIP **ALAMEDA CA**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ Change ☐ Addition

1.2 NAME **DAHL, ROBERT K.**  
1.3 STREET ADDRESS **1701 HARBOR BAY PARKWAY**  
1.4 CITY-ST-ZIP **ALAMEDA, CA 94502-3002**

2.1 TITLE **D** ☐ Change ☒ Addition

2.2 NAME **EVANS, ROGER L.**  
2.3 STREET ADDRESS **1701 HARBOR BAY PARKWAY**  
2.4 CITY-ST-ZIP **ALAMEDA, CA 94502-3002**

3.1 TITLE **D** ☐ Change ☒ Addition

3.2 NAME **KRAMLICH, C. RICHARD**  
3.3 STREET ADDRESS **1701 HARBOR BAY PARKWAY**  
3.4 CITY-ST-ZIP **ALAMEDA, CA 94502-3002**

4.1 TITLE **D** ☐ Change ☒ Addition

4.2 NAME **LALLY, JAMES P.**  
4.3 STREET ADDRESS **1701 HARBOR BAY PARKWAY**  
4.4 CITY-ST-ZIP **ALAMEDA, CA 94502-3002**

5.1 TITLE **D** ☐ Change ☒ Addition

5.2 NAME **SCHOFFSTALL, MARTIN L.**  
5.3 STREET ADDRESS **1701 HARBOR BAY PARKWAY**  
5.4 CITY-ST-ZIP **ALAMEDA, CA 94502-3002**

6.1 TITLE **D** ☐ Change ☒ Addition

6.2 NAME **ATKINS, BETTY**  
6.3 STREET ADDRESS **1701 HARBOR BAY PARKWAY**  
6.4 CITY-ST-ZIP **ALAMEDA, CA 94502-3002**

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: *[Signature]*

REQUIRED

8-10-98

510-769-6001

CR2E034 (5/98)

**ASCEND COMMUNICATIONS, INC.**

FEIN: 94-3092033

DOCUMENT #F96000001311 (7)

FLORIDA PROFIT CORPORATION ANNUAL REPORT - 1998

LINE 13 - ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  
(CONT.)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ASHBY, MICHAEL F. G. 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SYMONS, JEANETTE A. 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SCHNEIDER, BERNARD V. 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MISUNAS, DAVID 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HENDREN, MICHAEL E. 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SANFORD, CURTIS N. 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STAGNO, ANTHONY 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MACHLIN, ROBERT N. 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BULLINGTON, ELDON 1701 HARBOR BAY PARKWAY ALAMEDA, CA 94502-3002	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition