

2000 UNIFORM BUSINESS REPORT (UBR)

8/2/00-90152-020-\$150.00-\$150.00

DOCUMENT # F96000001633

1. Entity Name

CIROR, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

4210 S. Industrial Dr.
Suite, Apt. #, etc.

3. Mailing Address

4210 S. Industrial Dr.
Suite, Apt. #, etc.

City & State

Austin, TX

City & State

Austin, TX

4. FEI Number

94-3238686

Applied For

Not Applicable

Zip

78744

Country

USA

Zip

78744

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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, 2000 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

PCEO
HACKWORTH, MICHAEL L.
3100 W. WARREN AVE.
FREMONT, CA 94538

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPCO
DONOHUE, ROBERT F.
14625 GOLF LINKS DR.
LOS GATOS, CA 95030

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
SHELTON, RONALD K.
15392 KARL AVE.
MONTE SERENO, CA 95030

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PCEO
FRENCH, DAVID
4210 S. INDUSTRIAL DR.
AUSTIN, TX 78744-1077

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
JONES, GLENN
3100 W. WARREN AVE.
FREMONT, CA 94538

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
HOWARTH, STEVE
3100 W. WARREN AVE.
FREMONT, CA 94538

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

8000003464638--2
-11/15/00--01083--013
****400.00 ****400.00

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
OW

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/2000

Date

512/912-6329

Daytime Phone #

CR2E034 (9/99)