

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

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000002543 (4)

1. Corporation Name

SEAGATE SOFTWARE, INC.

Principal Place of Business

920 DISC DRIVE  
SCOTTS VALLEY CA 95066  
US

Mailing Address

920 DISC DRIVE  
SCOTTS VALLEY CA 95066  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/21/1996

4. FEI Number

77-0397623

Applied For

Not Applicable

6. 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

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

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

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 CDP  
NAME SHUGART, ALAN F  
STREET ADDRESS 920 DISC DR.  
CITY-ST-ZIP SCOTTS VALLEY CA 95067

TITLE DVTS  
NAME WAITE, DONALD L  
STREET ADDRESS 920 DISC DR.  
CITY-ST-ZIP SCOTTS VALLEY CA 95067

TITLE DC00  
NAME LUCZO, STEPHEN J.  
STREET ADDRESS 920 DISC DRIVE  
CITY-ST-ZIP SCOTTS VALLEY CA

TITLE D  
NAME FILLER, GARY  
STREET ADDRESS 920 DISC DR.  
CITY-ST-ZIP SCOTTS VALLEY CA 95067

TITLE D  
NAME PERLMAN, LAWRENCE  
STREET ADDRESS 920 DISC DR.  
CITY-ST-ZIP SCOTTS VALLEY CA 95067

TITLE VAT  
NAME CHAMBERLAIN, ELLEN  
STREET ADDRESS 920 DISC DR.  
CITY-ST-ZIP SCOTTS VALLEY CA 95067

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME Shugart, Alan F.  
1.3 STREET ADDRESS 920 Disc Drive  
1.4 CITY-ST-ZIP Scotts Valley, CA 95067

2.1 TITLE D  
2.2 NAME Waite, Donald L.  
2.3 STREET ADDRESS 920 Disc Drive  
2.4 CITY-ST-ZIP Scotts Valley, CA 95067

3.1 TITLE CD  
3.2 NAME Luczo, Stephen J.  
3.3 STREET ADDRESS 920 Disc Drive  
3.4 CITY-ST-ZIP Scotts Valley, CA 95067

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE VT  
6.2 NAME Chamberlain, Ellen E.  
6.3 STREET ADDRESS 915 Disc Drive  
6.4 CITY-ST-ZIP Scotts Valley, CA 95067

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 attached statement with an address.

CR2E034 (10/97)