

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002543

1. Entity Name

SEAGATE SOFTWARE, INC.

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90174 028 ***150.00

Principal Place of Business

Mailing Address

915 DISC DR
BUILDING 3
SCOTTS VALLEY CA 95066
US

915 DISC DR
BUILDING 3
SCOTTS VALLEY CA 95066-4543
US

80016423



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

77-0397623

Applied For

Not Applicable

Zip

Country

Zip

Country

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

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CUNNINGHAM, TERENCE
708 FIERO COMMERCE PARK, #5
SAND LUIS PBISPO CA 93401 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Gregory B. Kerfoot
840 Cambie St
Vancouver, BC V6B 4J2 ☒ Change ☒

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
LUCZO, STEPHEN J.
920 DISC DRIVE
SCOTTS VALLEY CA 95067 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
CHAMBERLAIN, ELLEN
915 DISC DRIVE
SCOTTS VALLEY CA 95067 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Susan J. Wolfe
915 Disc Drive
Scotts Valley, CA 95066 ☐ Change ☒

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

Date

Daytime Phone #