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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600003243 (0)

BAY NETWORKS USA, INC.

Principal Place of Business Mailing Address 8 FEDERAL STREET **8 FEDERAL STREET** BILLERICA MA 01821-3570 **BILLERICA MA 01821** 3. Date Incorporated or Qualified 3a. Date of Last Report 06/26/1996 2. Principal Place of Business 2a. Maiting Address 4, FEI Number Applied For Not Applicable 21 26 77-0427791 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Added to Fees 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City 84 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) (96/6) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DELETE TITLE 1.1 TITLE LUDWICK, ANDREW K 1.2 NAME David House NAME 4401 GREAT AMERICA PKWY 1.3 STREET ADDRESS STREET ADDRESS same SANTA CLARA CA same CITY-ST-ZIP 1.4 CHY-5T-ZIP Change **X** DELETE ___ Addition 2.1 TITLE TITLE RUEHLE, WILLIAM J NAME 2.2 NAME 4401 GREAT AMERICA PKWY 2.3 STREET ADDRESS STREET ADDRESS SANTA CLARA CA CITY-ST-ZIP 2.4 CITY - \$1 - ZIP TITLE X DELETE 3.1 THE Change Addition KERSTEN, J M NAME 3.2 NAME 4401 GREAT AMERICA PKWY STREET ADDRESS 3 3 STREET ADDRESS SANTA CLARA CA CITY-ST-ZIP 3.4, C/1Y-S1-Z/P Change DELETE Addition TITLE 4.1 TITLE FELLOWS, LINDA NAME 4.2 NAME 4401 GREAT AMERICA PKWY 4.3 STREET ADDRESS STREET ADDRESS SANTA CLARA CA CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME 63 STHEET ADDRESS STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE: LIND & FEMOLES

CITY-ST-ZIP

14. I do 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 equired by Chanter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

408-495-1964

FILED

May 05 1997 8:00am

Secretary of State