

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90894 021 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # F96000004492

1. Entity Name
SANDISK CORPORATION

Principal Place of Business

140 CASPIAN COURT
SUNNYVALE CA 94089

Mailing Address

140 CASPIAN COURT
SUNNYVALE CA 94089

2. Principal Place of Business

3. Mailing Address

140 Caspian Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Pouch 11

City & State

City & State

Sunnyvale, CA

4. FEI Number

77-0191793

Applied For

Not Applicable

Zip

Country

Zip

Country

94089

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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, 2002 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 **D** ☐ Delete
NAME **CAMPBELL, WILLIAM V.**
STREET ADDRESS **140 CASPIAN COURT**
CITY-ST-ZIP **SUNNYVALE CA**

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

TITLE **D** ☐ Delete
NAME **SHUGART, ALAN R.**
STREET ADDRESS **140 CASPIAN COURT**
CITY-ST-ZIP **SUNNYVALE CA**

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

TITLE **O** ☒ Delete
NAME **HUDSON, RALPH**
STREET ADDRESS **140 CASPIAN COURT**
CITY-ST-ZIP **SUNNYVALE CA 94089**

TITLE **VP/COO** ☐ Change ☒ Addition
NAME **Mehrota, Sanjay**
STREET ADDRESS **140 Caspian Ct.**
CITY-ST-ZIP **Sunnyvale, CA 94089**

TITLE **P/D** ☐ Delete
NAME **HARARI, EC DR.**
STREET ADDRESS **140 CASPIAN COURT**
CITY-ST-ZIP **SUNNYVALE CA 94089**

TITLE **P/D** ☒ Change ☐ Addition
NAME **Harari, Eli Dr.**
STREET ADDRESS **140 Caspian Court**
CITY-ST-ZIP **Sunnyvale, CA 94089**

TITLE **V** ☒ Delete
NAME **CALDERONI, FRANK**
STREET ADDRESS **140 CASPIAN COURT**
CITY-ST-ZIP **SUNNYVALE CA 94089**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Van Orden, Charles**
STREET ADDRESS **140 Caspian Court**
CITY-ST-ZIP **Sunnyvale, CA 94089**

TITLE **D** ☐ Delete
NAME **LAGO, CATHERINE P**
STREET ADDRESS **140 CASPIAN COURT**
CITY-ST-ZIP **SUNNYVALE CA 94089**

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

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:

CHARLES VAN ORDEN, Secretary

4/25/02

Date

Daytime Phone #

CR2E034 (9/01)