

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000000394

1. Corporation Name

IMPAC MEDICAL SYSTEMS, INC.

Principal Place of Business

**215 CASTRO ST
MOUNTAIN VIEW CA 94041-1203**

Mailing Address

**215 CASTRO ST
MOUNTAIN VIEW CA 94041-1203**

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90080 008 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/23/1997

4. FEI Number

94-3109238

Applied For
Not Applicable

5. 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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 **25**

29 **30**

9. Name and Address of Current Registered Agent

**CORPAMERICA, INC.
1525 S ANDREWS AVE #216
FT LAUDERDALE FL 33316**

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

P ☐ DELETE
JACHINOWSKI, JOSEPH K
215 CASTRO ST
MOUNTAIN VIEW CA 94041-1203

V ☐ DELETE
HOEY, JAMES J
215 CASTRO ST
MOUNTAIN VIEW CA 94041-1203

ST ☐ DELETE
AUERBACH, DAVID A
215 CASTRO ST
MOUNTAIN VIEW CA 94041-1203

D ☐ DELETE
BECKER, ROBERT M.D.
215 CASTRO STREET
MOUNTAIN VIEW CA 94041

D ☐ DELETE
ROSE, CHRISTOPHER M
215 CASTRO ST
MOUNTAIN VIEW CA 94041

D ☒ DELETE
GARFINDL, NEIL
215 CASTRO STREET
MOUNTAIN VIEW CA 94041

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D

GREG AVIS

215 CASTRO STREET

MOUNTAIN VIEW, CA 94041-1203

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-25-99

650-254-4700

CR2E034 (1/98)