




# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90114 050 \*\*\*150.00

<b>DOCUMENT # F97000003276</b> 1. Entity Name <b>NETSCOUT SYSTEMS, INC.</b>					
Principal Place of Business <b>310 LITTLETON RD WESTFORD, MA 01886 US</b>			Mailing Address <b>310 LITTLETON RD WESTFORD, MA 01886 US</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>04-2837575</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CSD POPAT, NARENDRA 310 LITTLETON RD WESTFORD, MA 01886	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	0 Mullarkey, Vincent J 2 Wingate Lane Acton, MA 01720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FIORENTINO, LISA 310 LITTLETON RD WESTFORD, MA 01886	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Demarines, Victor 5 Hunt Road Westford, MA 01886
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SINGHAL, ANIL 310 LITTLETON RD WESTFORD, MA 01886	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Egan, John R 116 Flanders Road Westborough, MA 01581
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EGAN, JOHN R 22 OLD FARM ROAD HOPKINTON, MA 01748	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Schiciano, Kenneth HIGH ST TOWER, STE.#2500, 125 HIGH ST BOSTON, MA 02110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HADZIMA, JOSEPH 238 MAINSTREET, STE. #201 CAMBRIDGE, MA 02142	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hadzima, Joseph One Broadway, Suite 1300 Cambridge, MA 02142
12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
<b>SIGNATURE:</b> 			4/27/05 (978) 614-43721		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		