

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90040 021 ***150.00

DOCUMENT # F97000006022

1. Entity Name

CROSSWORLDS SOFTWARE, INC.

Principal Place of Business

Mailing Address

**577 AIRPORT BLVD., STE. 800
 BURLINGAME CA 94010**

**577 AIRPORT BLVD., STE. 800
 BURLINGAME CA 94010**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

94-3240149

Applied For

Not Applicable

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, 2001 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 **GARNETT, KATRINA A**
 STREET ADDRESS **577 AIRPORT BLVD., STE. 800**
 CITY-ST-ZIP **BURLINGAME CA 94010**

TITLE **Chief Executive Officer/President** ☐ Change ☒ Addition
 NAME **Alfred Amoroso**
 STREET ADDRESS **577 Airport Blvd, Suite 800**
 CITY-ST-ZIP **Burlingame, CA 94010**

TITLE **D** ☐ Delete
 NAME **GLUCK, FREDERICK**
 STREET ADDRESS **2614A JACKSON ST.**
 CITY-ST-ZIP **SAN FRANCISCO CA 94115**

TITLE **Chief Financial Officer** ☐ Change ☒ Addition
 NAME **James Budge**
 STREET ADDRESS **577 Airport Blvd, Suite 800**
 CITY-ST-ZIP **Burlingame, CA 94010**

TITLE **D** ☒ Delete
 NAME **KENT, MARK R**
 STREET ADDRESS **577 AIRPORT BLVD., STE. 800**
 CITY-ST-ZIP **BURLINGAME CA 94010**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Terence Garnett**
 STREET ADDRESS **577 Airport Blvd, Suite 800**
 CITY-ST-ZIP **Burlingame, CA 94010**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **Director** ☐ Change ☒ Addition
 NAME **Andrew Ludwig**
 STREET ADDRESS **577 Airport Blvd, Suite 800**
 CITY-ST-ZIP **Burlingame, CA 94010**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **Director** ☐ Change ☒ Addition
 NAME **Albert A Pimentel**
 STREET ADDRESS **577 Airport Blvd, Suite 800**
 CITY-ST-ZIP **Burlingame, CA 94010**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Budge, CFO

4/1/01
 Date

650 685 9051
 Daytime Phone #

CR2E034 (10/00)