

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004021

FILED
May 01, 2005
Secretary of State

Entity Name: ULTRADATA CORPORATION

Current Principal Place of Business:

5000 FRANKLIN DR
PLEASANTON, CA 94588

New Principal Place of Business:

2939 MILLER ROAD
DECATUR, GA 30035

Current Mailing Address:

2939 MILLER ROAD
DECATUR, GA 30035

New Mailing Address:

FEI Number: 94-2746681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TUFF, TIMOTHY C
Address: 3406 VALLEY CIRCLE
City-St-Zip: ATLANTA, GA 30305

Title: VS () Delete
Name: WALTERS, JOHN C
Address: 4425 PEMBERTON COVE
City-St-Zip: ALPHARETTA, GA 30022

Title: VT () Delete
Name: BOND, HENRY R
Address: 2939 MILLER ROAD
City-St-Zip: DECATUR, GA 30035

Title: AS () Delete
Name: BOWEN, SARAH K
Address: 2939 MILLER ROAD
City-St-Zip: DECATUR, GA 30035

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: CARDEN, CHARLES B
Address: 2939 MILLER ROAD
City-St-Zip: DECATUR, GA 30035

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARAH K. BOWEN

AS

05/01/2005

Electronic Signature of Signing Officer or Director

_____ Date