2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005198

Entity Name: GRAPHICS MICROSYSTEMS, INC.

FILED Jan 23, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
484 OAKMEAD PARKWAY SUNNYVALE, CA 94085						
Current Mailing Address:			New Mailir	New Mailing Address:		
484 OAKMEAD PARKWAY SUNNYVALE, CA 94085						
FEI Number:	94-2906556	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US						
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		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CFOV () D REED, TIMOTHY 484 OAKMEAD PA SUNNYVALE, CA	ARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () D DEERING, EDWIN 1655 SCEINCE P ROCKWALL, TX	N LACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PCEO () D WETZEL, GARY 1655 SCIENCE P ROCKWALL, TX	LACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () D BARNES, FRED 484 OAKMEAD PA SUNNYVALE, CA	ARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () D MOYA, FRANCOIS 484 OAKMEAD PA SUNNYVALE, CA	S ARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DIR () D BILL, SPURGEON 1100 WEST 31ST DOWNERS GROV	I STREET	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition HENDERSON, BECKY 1655 SCIENCE PLACE ROCKWALL, TX 75087		
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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						

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY REED VP 01/23/2008

the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears