

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004738

Entity Name: AGILENT TECHNOLOGIES, INC.

FILED
Jan 13, 2006
Secretary of State

Current Principal Place of Business:

395 PAGE MILL RD
PALO ALTO, CA 94306

New Principal Place of Business:

Current Mailing Address:

395 PAGE MILL RD
PALO ALTO, CA 94306

New Mailing Address:

FEI Number: 77-0518772

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: BARNHOLT, EDWARD W
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

Title: VPCF () Delete
Name: DILLON, ADRIAN T
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

Title: VPF () Delete
Name: EATON, JOHN R
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

Title: VPHR () Delete
Name: HALLORAN, JEAN M
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

Title: VPC () Delete
Name: HIRSCH, DIDIER
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94304

Title: VPGC () Delete
Name: NORDLUND, CRAIG D
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: SULLIVAN, WILLIAM P
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

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

Title: VPF (X) Change () Addition
Name: COOPER, DAVID B JR
Address: 395 PAGE MILL ROAD
City-St-Zip: PALO ALTO, CA 94306

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: D CRAIG NORDLUND

VPGC

01/13/2006

Electronic Signature of Signing Officer or Director

Date