

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01324

FILED
Apr 15, 2004
Secretary of State

Entity Name: INRANGE TECHNOLOGIES CORPORATION

Current Principal Place of Business:

6000 NATHAN LANE N
PLYMOUTH, MN 55442 US

New Principal Place of Business:

Current Mailing Address:

6000 NATHAN LANE N
PLYMOUTH, MN 55442 US

New Mailing Address:

FEI Number: 06-0962862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERIVCES, INC.
526 E. PARK AVE.
TALLAHASSEE, FL 32301 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: VPCS () Delete
Name: BARNUM, GREGPRY T
Address: 4760 BAYSIDE ROAD
City-St-Zip: ORONO, MN 55359

Title: CCT () Delete
Name: BERTELSEN, JEFFREYPHER A
Address: 5714 POND DRIVE
City-St-Zip: SHOREVIEW, MN 55126

Title: VP () Delete
Name: BEYER, ROBERT R
Address: 4950 SHADY ISLAND CIRCLE
City-St-Zip: MOUND, MN 55364

Title: D () Delete
Name: EARLEY, KATHLEEN B
Address: 7 LAURELWOOD DRIVE
City-St-Zip: BERNARDSVILLE, NJ 07924

Title: D () Delete
Name: GROSS, PATRICK W
Address: 7401 GLENBROOK ROAD
City-St-Zip: BETHESDA, MD 20814

Title: D () Delete
Name: HUDSON, THOMAS G
Address: 45 DIDEONS POINT ROAD
City-St-Zip: TONKA BAY, MN 55331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPCS (X) Change () Addition
Name: BARNUM, GREGORY T
Address: 4760 BAYSIDE ROAD
City-St-Zip: ORONO, MN 55359

Title: CCT (X) Change () Addition
Name: BERTELSEN, JEFFREY A
Address: 5714 POND DRIVE
City-St-Zip: SHOREVIEW, MN 55126

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:

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: JEFF BERTELSEN

CCT

04/15/2004

Electronic Signature of Signing Officer or Director

Date