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**Mar 26 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02951 (2)

1. Corporation Name
XICOR, INC.



Principal Place of Business: **1511 BUCKEYE DR MILPITAS CA 95035**
Mailing Address: **1511 BUCKEYE DR MILPITAS CA 95035-7431**

3. Date Incorporated or Qualified: **08/07/1984** 3a. Date of Last Report: **02/21/1996**
4. FEI Number: **94-2526781** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLEIN, RAPHAEL	1.2 NAME	
STREET ADDRESS	1511 BUCKEYE DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	MILPITAS CA	1.4 CITY - ST - ZIP	
TITLE	DS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANK, JULIUS	2.2 NAME	
STREET ADDRESS	1511 BUCKEYE DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	MILPITAS CA	2.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELDER, ANDREW W.	3.2 NAME	
STREET ADDRESS	1511 BUCKEYE DRIVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	MILPITAS CA	3.4 CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENDIG, KLAUS G.	4.2 NAME	
STREET ADDRESS	1511 BUCKEYE DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	MILPITAS CA	4.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLINE, S ALLAN	5.2 NAME	
STREET ADDRESS	1511 BUCKEYE DRIVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	MILPITAS CA	5.4 CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWEN, WILLIAM	6.2 NAME	
STREET ADDRESS	1511 BUCKEYE DRIVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	MILPITAS CA	6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Sandra B. Mortham* **Feb 27, 1997** 408 432-8888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

Corporation Annual Report 1997

Block-12 Additional Officers and Directors

<u>Title</u>	<u>Name</u>	<u>Street Address</u>	<u>City, State and Zip Code</u>
D	Hans Dill	1511 Buckeye Drive	Milpitas, CA 95035
V	Joseph Drori	1511 Buckeye Drive	Milpitas, CA 95035
V	Bruce Mattern	1511 Buckeye Drive	Milpitas, CA 95035
V	Geraldine N. Hench	1511 Buckeye Drive	Milpitas, CA 95035
V	Timothy D. Kanemoto	1511 Buckeye Drive	Milpitas, CA 95035
V	Bruce Gray	1511 Buckeye Drive	Milpitas, CA 95035