

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14929

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: COGNOS CORPORATION

## Current Principal Place of Business:

15 WAYSIDE ROAD  
200W  
BURLINGTON, MA 01803 US

## New Principal Place of Business:

## Current Mailing Address:

15 WAYSIDE ROAD  
200W  
BURLINGTON, MA 01803 US

## New Mailing Address:

FEI Number: 94-2763235      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: S ( ) Delete  
Name: SHONE, KEVIN  
Address: 15 WAYSIDE ROAD  
City-St-Zip: BURLINGTON, MA 01803 US

Title: T ( ) Delete  
Name: GILBODY, RICHARD  
Address: 15 WAYSIDE ROAD  
City-St-Zip: BURLINGTON, MA 01803 US

Title: P ( ) Delete  
Name: HALL, TERRY  
Address: 3755 RIVERSIDE DR  
City-St-Zip: OTTAWA, ONTARIO, CANADA,

Title: AS ( ) Delete  
Name: O'BRIAN, JOANNE  
Address: 15 WAYSIDE ROAD  
City-St-Zip: BURLINGTON, MA 01803 US

Title: V ( ) Delete  
Name: SIRIANNI, ANTHONY  
Address: 15 WAYSIDE ROAD  
City-St-Zip: BURLINGTON, MA 01803 US

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: AS (X) Change ( ) Addition  
Name: MACDOUGALL, MICHAEL  
Address: 15 WAYSIDE ROAD  
City-St-Zip: BURLINGTON, MA 01803

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

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

Title: AS ( ) Change (X) Addition  
Name: CARROLL, WILLIAM  
Address: 15 WAYSIDE ROAD  
City-St-Zip: BURLINGTON, MA 01803

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: WILLIAM CARROLL

AS

04/28/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date