

**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6384

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Account Name : C T CORPORATION SYSTEM
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Phone : (850) 222-1092
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**CORPORATION REINSTATEMENT
COGNOS CORPORATION**

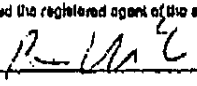
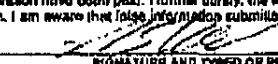
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P14929			
1. Corporation Name COGNOS CORPORATION			
2. Principal Office Address - No P.O. Box # 5 Technology Park Drive		3. Mailing Office Address 5 Technology Park Drive	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Westford, MA		City & State Westford, MA	
Zip 01886	Country USA	Zip 01886	Country USA
4. Date incorporated or Qualified To Do Business in Florida 06/22/1987			
5. FEI Number 94-2763235		☐ Applied For ☐ Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐		\$318 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name CT Corporation			
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road			
Suite, Apt. #, Etc.			
City Plantation		State FL	Zip Code 33324
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0503, F.S.			
Signature of Registered Agent 		Bernadette McNamara REGISTERED ASSISTANT SECRETARY Date 7/26/2011	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Archie W. Colburn	1 New Orchard Road	Armonk, NY 10504
D	Jeffrey J. Doyle	1 New Orchard Road	Armonk, NY 10504
D	Mark Goldstein	1 New Orchard Road	Armonk, NY 10504
V/Asst. S	Raymond Amanquah	425 Market Street	San Francisco, CA 94105
V	Robert Ashe	3755 Riverside Dr.	Ottawa, ON K1G 4K9 Canada
T	Robert Del Bene	1 New Orchard Road	Armonk, NY 10504
10. E-mail Address: agrits@us.ibm.com			
(To be used for future annual report notification)			
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.			
SIGNATURE: 		ANDREW S. WHITE ASST SECRETARY Date 7/26/2011	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

REINSTATEMENT

2010-11

SG