

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P17565

1. Entity Name

PHILIPS SEMICONDUCTORS INC.

Principal Place of Business

1109 MCKAY DR
SAN JOSE CA 95131
US

Mailing Address

1109 MCKAY DR
SAN JOSE CA 95131
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 94-2597282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME CURRAN, WILLIAM E
STREET ADDRESS 1251 AVENUE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY 10020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE EVP
NAME ANDERSON, ROSS E
STREET ADDRESS 811 E. ARGUES AVENUE
CITY-ST-ZIP SUNNYVALE CA 94088-3409 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME FRIEDLANDER, PAUL S
STREET ADDRESS 1251 AVENUE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY 10020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME OATES, WARREN T JR
STREET ADDRESS 1251 AVENUE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY 10020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME CHEW, BELINDA W
STREET ADDRESS 1251 AVENUE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY 10020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME LUCAS, GERARDUS
STREET ADDRESS 1251 AVENUE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY 10020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01

Date

212-536-0784

Daytime Phone #

FILED
May 07, 2001 8:00 am
Secretary of State

05-07-2001 90004 005 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)