2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2009
Secretary of State

DOCUMENT# P23738

Entity Name: TOSHIBA AMERICA INFORMATION SYSTEMS, INC.

Current Principal Place of Business:

9740 IRVINE BLVD.
IRVINE, CA 92618 US

New Principal Place of Business:

Current Mailing Address:

TAX DEPT
PO BOX 19724
IRVINE, CA 926239724 US

New Mailing Address:

FEI Number: 33-0338017 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	NAMAITA, TSUTOMU	
Address:	1-1, SHIBAURA 1-CHOME MINATO-KU	
City-St-Zip:	TOKYO, JAPAN,	
Title:	VPCF	( ) Delete
Name:	JOHNSON, JEFFREY P	
Address:	9740 IRVIN BLVD	
City-St-Zip:	IRVINE, CA 92618	
Title:	PD	( ) Delete
Name:	FUKAKUSHI, MASAHIKO	
Address:	9740 IRVINE BLVD	
City-St-Zip:	IRVINE, CA 92618	
Title:	VP	( ) Delete
Name:	MILLIKEN, JACK	
Address:	9740 IRVINE BLVD	
City-St-Zip:	IRVINE, CA 92618	
Title:	D	( ) Delete
Name:	UCHIIKE, TORU	
Address:	1251 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10020	
Title:	VPS	( ) Delete
Name:	GRAY, DONALD	
Address:	940 IRVINE BLVD	
City-St-Zip:	IRVINE, CA 92618	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	PD	(X) Change ( ) Addition
Name:	SIMONS, MARK	
Address:	9740 IRVINE BLVD	
City-St-Zip:	IRVINE, CA 92618	
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 exemption stated in Chapter 119, 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: JEFFEREY P JOHNSON VP 06/22/2009

Electronic Signature of Signing Officer or Director Date