

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90029 044 ***150.00

DOCUMENT # P24232

1. Entity Name

THE SANTA CRUZ OPERATION, INC.

Principal Place of Business

**400 ENCINAL ST
 SANTA CRUZ CA 95060**

Mailing Address

**P.O. BOX 1900
 SANTA CRUZ CA 95061-1900**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

94-2549086

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

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

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, 2000 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	D	<input type="checkbox"/> Delete
NAME	MCCLURE, ROBERT	
STREET ADDRESS	P. O. BOX 2889 N/A	
CITY-ST-ZIP	EVERGREEN CO	
TITLE	DO <input type="checkbox"/> Delete	
NAME	MICHEL, DOUGLAS	
STREET ADDRESS	4717 BRANCIORTE DR.	
CITY-ST-ZIP	SANTA CRUZ CA	
TITLE	D	<input type="checkbox"/> Delete
NAME	EADIE, NINIAN	
STREET ADDRESS	18 THE MALL, EAST SHEEN	
CITY-ST-ZIP	LONDON ENGLAND ER	
TITLE	DP <input type="checkbox"/> Delete	
NAME	ALOK MOHAN	
STREET ADDRESS	85 PASATIEMPO DR	
CITY-ST-ZIP	SANTA CRUZ CA	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMSON, GILBERT	
STREET ADDRESS	2320 KETTERING TOWER	
CITY-ST-ZIP	DAYTON OH	
TITLE	SV	<input type="checkbox"/> Delete
NAME	SABBATH, STEVEN M	
STREET ADDRESS	333 BLACKSTONE DR	
CITY-ST-ZIP	BOULDER CREEK CA	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LACHMAN, RONALD	
STREET ADDRESS	3140 WHISPERWOODS COURT	
CITY-ST-ZIP	NORTHBROOK, IL 60062	
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHEL, DOUGLAS	
STREET ADDRESS	4717 BRANCIORTE DR.	
CITY-ST-ZIP	SANTA CRUZ, CA 95065	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMPSON, R. DUFF	
STREET ADDRESS	1024 E. RIVERHAVEN CIRCLE	
CITY-ST-ZIP	OREM, UT 84058	
TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOHAN, ALOK	
STREET ADDRESS	4706 EAGLES NEST CIRCLE	
CITY-ST-ZIP	KETTERING, OH 45429	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SABBATH, STEVEN M.	
STREET ADDRESS	333 BLACKSTONE DR.	
CITY-ST-ZIP	BOULDER CREEK, CA 95006	

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

Steven M. Sabbath Steven M. Sabbath, 2/17/00 (831) 427-7159

Date

Daytime Phone #

CR2E034 (9/99)