FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

	1001							
	MENT # P27779 SYSTEMS, INC.	(8)			# 1288/1186/ 118 1186/ 1288/1 188/ 188/ 188/ 18	# 0.0 34 0.0 14 0.10	 	DI BILL PORT
						2181 2181 618		
Principal Place		Mailing Address				' '	II BIBII BE G EC	FIEI1 1981
170 W. Tasman Drive San Jose Ca 95134 Us		170 W. Tasman Drive San Jose Ca 95134-1700 Us						
		•			3. Date Incorporated or Qualified 01/19/1990	· ·	e of Last R 0/1996	eport
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	1 Applied 1		
21		26			77-0059951			
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & State		City & State			A Floring Compains Floring			·
23	•	28			6. Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added 1	
Zip					8. This corporation has liability for			
24	25	29 30	0				No.	. 105.002,
	9. Name and Address of Curren	t Registered Agent		····	10. Name and Address of New R	egistered A	gent	
THE	PRENTICE-HALL CORPORATION	I SYSTEM INC.	81	Name				
1201 HAYS STREET			82	Street	Address (P.O. Box Number is Not Accepta	ble)		
	E 105			· · · · · · · · · · · · · · · · · · ·		·		
TALLAHASSEE FL 32301			83					
			84	City			85 Zip (Code
		0 1007 4500 50 51 51 0				<u>FL</u>		
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	iz and 607.1508, Florida Statutes, of Florida. Such change was aut	, the above horized by	e-named r the corp	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of c ept the appoi	nanging it Intment as	s registered registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	da Statutes	3.	•			
SIGNATURE	Signature, typed or printed name of registered age	(NOTE: 4	constand Ans	ord elementure	required when reinstating)	DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFF		DIRECTOR	S IN 12
TITLE	P DELEIE 1.11		1.1 111(F			I	Change	Addition
NAME	JOHN T. CHAMBERS		1.2 NAME					
STREET ADDRESS			1.3 STREET ADDRESS					
CITY-ST-ZIP			1.4 CITY - S	T-ZIP			<u> </u>	
TITLE	•		2.1 TITLE			Ł	Change	Addition
NAME	Transport of the second		2.2 NAME					1
STREET ADDRESS	*** **** ****		2.3 STREET					
CITY-ST-ZIP			2. 4 CITY - 5 3.1 TITLE	ST-ZIP		Т	Change	Addition
TITLE NAME					1	L		L_I Namon
STREET ADDRESS 3000 SANDHILL RD, BLDG 4, STE 280		STF 280	3.2 NAME 3.3 STREET ADDRESS					
CITY-ST-ZIP	MENLO PARK CA	VIE 200	3.3 STREET					l
TITLE			41 11716	24 - EII			☐ Change	Addilion
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP	SAN JOSE CA 440		4.4 CITY - S	T- Z (P				
TITLE	D DELETE 5.1 TI		5.1 TITLE		Director		Change	Addition
NAME			5.2 NAME		John P. Morgridge 170 W. Tasman Drn San Jose, CA			;
STREET ADDRESS	17.0		5.3 STREET	ADDRESS	170 W. Tasman Driv	' C		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP	San Jose, CA		7	A capt.
TITLE			6.1 TITLE			L	Change	Addition
NAME	GIBBONS, JAMES		6.2-NAME					
STREET ADDRESS	170 W. TASMAN DRIVE		6.3 STREET	ADDRESS				

1. I do 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 annual report or supplemental annual 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 information trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address.

CICALATUDE: III

SIGN/CILICLARRY RI

4/22/0-

(408) 526-4000

FILED

May 05 1997 8:00am

Secretary of State