Apr 20, 2000 8:00 am Secretary of State

FILED

AND EX DATA BIOTENS COLLICIATION							04-20-2000 90004 019 ***150.00			
Principal Plac	ce of Business	 -	Mailing Address							
00 Broadwa IS 5-103 EDWOOD CIT IS			500 BROADWAY M/S 4101 REDWOOD CITY CA 94063-3115 US				718	28 2	4 MINI NINK MIN	121 8(1 (1 1 41)
2. Principal F	Place of Busin	ess	3. Mailing Address							
500 B	roadway		500 Broadway					1868 1811 BIBN 81811	! 	
Suite, Apt.			Suite, Apt. #, etc.				DO NOT W	VRITE IN THIS S	PACE	
M/S 1	101		M/S 1101							
City & Stat			City & State			4. 8	El Number 94-3112	575		oplied For
	od City		Redwood City, CA Zip Country							t Applicable
Zip	2100	Country	Zip 94063-3199	USA	•	5. 0	Certificate of Status Desire		\$8.75 Add Fee Require	
94003	-3199;	USA and Address of Current		U D	<u> </u>	7. N	lame and Address of Ne			
		and Address of Carroin	nogistorea rigent		Name					
001	OCCUPATION.	CEDMOE COMPANY						_ · ·		
	APORATION 1 HAYS STF	SERVICE COMPANY		Street Address (P.			ox Number is Not Accepta	ible)		
		FL 32301-2525				 ,	·			
IAL	LAI IAOOLL	L 05001-5050			<u> </u>					
					City			FL	Zip Code	e
3. The above	e named entity	submits this statement for	r the purpose of changing its	registere	ed office o	registered age	ent, or both, in the State of	Florida.		
SIGNATURE	Signature, typed	or printed name of registered agent a	and tale if applicable. (NOT	E: Registere	d Agent signat	ure required when rei	instating)	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 \$ After MAY 1, 2000 Fee will Make Check Payable to Depar			550.00	10. Election Campaign Trust Fund Contribu	· _ +0.00, 50		
11.	· · ·	OFFICERS AND	DIRECTORS	12.			DITIONS/CHANGES TO C	OFFICERS AND	DIRECTOR	S IN 11
TILE	PD		☐ Delete	TITLE		VP/D			XIX Change	Addition
IAME	ATCHISO	n, robert l					n, Robert L			
STREET ADDRESS 500 BROADWAY				•	ET ADDRESS					
CITY-ST-ZIP	I	D CITY CA 94063		_	-ST-ZIP	AC/D				
ITLE	D		Delete	TITLE		AS/D Bramson	, Edward J		X Change	Addition
IAME STREET ADDRESS	1	N, EDWARD J		NAMI	ET ADDRESS	Drumbon.	, Dawara o			į
CITY-ST-ZIP	500 BRO/				-ST-ZIP					
ITLE - ~~	VPS-	D CITY CA 94063	- 🗔 Delete	TITLE		VP/S/D			XX Change	Addition
ince - ∞ Name	TALCOTT	INEL D	- Let Delete	NAMI		Talcott,			A.A. Onange	. [,_] Addition
TREET ADDRESS	500 BRO				ET ADDRESS	,				
CITY-ST-ZIP		D CA 94063		CITY	-ST-ZIP					
TTLE	VPTC	<u> </u>	☑ Delete	TITLE		P/D			☐ Change	XX Addition
IAME	1	ROBERT W		NAM		Cooper,	K. Michael		-	
TREET ADDRESS	500 BRAC				ET ADDRESS	500 Bro	adway			
CITY-ST-ZIP		D CITY CA 94063		CITY	-ST-ZIP	Redwood	City, CA 940	63		
ITLE	VP		☐ Delete	TITLE		VP/T		:	xxx Change	Addition
IAME		N, CRAIG L		NAM		McKibber	ı, Craig L.			
STREET ADDRESS	500 BRO/				ET ADDRESS					
CITY-ST-ZIP		D CITY CA 94063			-ST-ZIP			_		
TTLE	DVIVE OL	IADLED W	☐ Delete	TITLE		ĺ			☐ Change	Addition
IAME	-	IARLES W		NAMi	ET ADDRESS					
TREET ADDRESS										

REDWOOD CITY CA 94063 13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

O'R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P32109
1. Entity Name

AMPEY DATA SYSTEMS CORRORATION

April 12, 2000

650-367-3330

Daytime Phone #