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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39359

(5)

1. Corporation Name

MICRO FOCUS INCORPORATED

Principal Place of Business

2465 E. BAYSHORE ROAD, SUITE 400
PALO ALTO CA 94303

Mailing Address

2465 E. BAYSHORE ROAD, SUITE 400
PALO ALTO CA 94303-3297



3. Date Incorporated or Qualified
06/23/1992

3a. Date of Last Report
04/27/1996

4. FEI Number

94-2681777

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
STE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
GUMUCIO, MARCELO
STREET ADDRESS
2465 E. BAYSHORE RD, #400
CITY - ST - ZIP
PALO ALTO CA 94303

TITLE ☒ DELETE
NAME
HILLBERG, LOREN E.
STREET ADDRESS
2465 E. BAYSHORE RD, #400
CITY - ST - ZIP
PALO ALTO CA 94303

TITLE ☒ DELETE
NAME
CONNORS, ROBERT A.
STREET ADDRESS
2465 E. BAYSHORE RD, #400
CITY - ST - ZIP
PALO ALTO CA 94303

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
Vice President
2.3 STREET ADDRESS
Robert A. Connors
2465 E. Bayshore Rd.
2.4 CITY - ST - ZIP
Palo Alto, CA 94303

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
Secretary
Loren E. Hillberg
3.3 STREET ADDRESS
2465 E. Bayshore Rd.
3.4 CITY - ST - ZIP
Palo Alto, CA 94303

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME
Treasurer
Tony Muller
4.3 STREET ADDRESS
2465 E. Bayshore Rd.
4.4 CITY - ST - ZIP
Palo Alto, CA 94303

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. 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 the receiver or trustee 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 on an attachment with an address.

SIGNATURE:

Loren E. Hillberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Loren E. Hillberg

(415) 856-4161

Date

Daytime Phone #

CR2E034 (9/96)