2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2000 8:00 am
Secretary of State
03-28-2000 90065 042 ***150.00

DOCUMENT # P39359

1. Entity Name

MICRO FOCUS INCORPORATED

Principal Place of Business	Mailing Address
701 E. MIDDLEFIELD ROAD MOUNTAIN VIEW CA 94043	701 E. MIDDLEFIELD ROAD MOUNTAIN VIEW CA 94043-4023

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 94-2681777 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CEOD GREENFIELD, GARY 9420 KEY WEST AVENUE ROCKVILLE MD 20850	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HOESEN, RICK VAN 701 EAST MIDDLEFIELD ROAD MOUNTAIN VIEW CA 94043	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP/Director Kenneth Sexton 9420 Key West Avenue Rockville, MD 20850	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LOEHLER, FRITZ K 701 EAST MIDDLEFIELD ROAD MOUNTAIN VIEW CA 94043	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Koehler, Fritz K.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BLEGEN, BERNIE 701 EAST MIDDLEFIELD ROAD MOUNTAIN VIEW CA 94043	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer/Director Michael Wright 9420 Key West Avenue Rockville, MD 20850	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

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: Fritz K. Koehler Fritz K. Koehler March 24, 2000 (650) 938-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #