2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004907

Entity Name: SIGMA GP HOLDING, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 273 CORPORATE DRIVE 400 MATTHEW STREET SUITE 100 SANTA CLARA, CA 95050 PORTSMOUTH, NH 03801 **New Mailing Address: Current Mailing Address:** P O BOX 8749 PRINCETON, NJ 08543 FEI Number: 58-2489228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SODER, DOUGLAS L SODER, DOUGLAS L Name: Name: 273 CORPORATE DRIVE, SUITE 100 400 MATTHEW STREET Address: Address: City-St-Zip: PORTSMOUTH, NH 03801 City-St-Zip: SANTA CLARA, CA 95050 Title: (X) Change () Addition Title: () Delete MOROZE, M. BRIAN Name: MOROZE, BRIAN M Name: 273 CORPORATE DRIVE, SUITE 100 400 MATTHEW STREET Address: Address: PORTSMOUTH, NH 03801 SANTA CLARA, CA 95050 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete ABROMEIT, RICHARD H ABROMEIT, RICHARD H Name: Name: 273 CORPORATE DRIVE, SUITE 100 400 MATTHEW STREET Address: Address: City-St-Zip: PORTSMOUTH, NH 03801 City-St-Zip: SNATA CLARA, CA 95050 Title: () Delete Title: () Change (X) Addition FLANIGAN, TIMOTHY E Name: Name: Address: Address: 400 MATTHEW STREET City-St-Zip: City-St-Zip: SANTA CLARA, CA 95050

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: DOUGLAS SODER 04/20/2005