

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P14729** (8)

1. Corporation Name  
**CADENCE DESIGN SYSTEMS, INC.**



Principal Place of Business: **555 RIVER OAKS PKWY. SAN JOSE CA 95134**  
Mailing Address: **555 RIVER OAKS PKWY. SAN JOSE CA 95134**

3. Date Incorporated or Qualified: **06/05/1987**  
3a. Date of Last Report: **03/28/1995**  
4. FEI Number: **77-0148231**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contributor:  **\$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: **555 RIVER OAKS PKWY. SAN JOSE CA 95134**  
2a. Mailing Address: **555 RIVER OAKS PKWY. SAN JOSE CA 95134**  
21. Subj., Apt. #, etc.:  
22. City & State:  
23. Zip:  
24. Country:  
25. Country:

9. Name and Address of Current Registered Agent: **CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324**  
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 607.0506, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME: <b>EVP BINGHAM, H. R.</b>	<input type="checkbox"/> DELETE	13.1 TITLE: <b>VP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12.2 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.2 NAME: <b>MARK GARRETT</b>	
12.3 CITY, ST., ZIP: <b>P</b>		13.3 STREET ADDRESS: <b>555 RIVER OAKS PARKWAY</b>	
12.4 NAME: <b>COSTELLO, JOSEPH B.</b>	<input type="checkbox"/> DELETE	13.4 CITY, ST., ZIP: <b>SAN JOSE CA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 STREET ADDRESS: <b>555 RIVER OAKS PARKWAY SAN JOSE CA</b>		13.5 TITLE: <b>VP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 CITY, ST., ZIP: <b>SVP</b>	<input type="checkbox"/> DELETE	13.6 NAME: <b>MARK GARRETT</b>	
12.7 NAME: <b>LEACH, M. R.</b>		13.7 STREET ADDRESS: <b>555 RIVER OAKS PARKWAY</b>	
12.8 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.8 CITY, ST., ZIP: <b>SAN JOSE CA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.9 CITY, ST., ZIP: <b>COOD</b>	<input type="checkbox"/> DELETE	13.9 TITLE: <b>VP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 NAME: <b>LIU, LEONARD Y W.</b>		13.10 NAME: <b>MCCUTCHEON, DOUGLAS J</b>	
12.11 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.11 STREET ADDRESS: <b>555 RIVER OAKS PKWY.</b>	
12.12 CITY, ST., ZIP: <b>VP</b>	<input checked="" type="checkbox"/> DELETE	13.12 CITY, ST., ZIP: <b>SAN JOSE CA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.13 NAME: <b>MCCUTCHEON, DOUGLAS J</b>		13.13 TITLE: <b>VPAS</b>	<input type="checkbox"/> DELETE
12.14 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.14 NAME: <b>PORTER, WILLIAM</b>	
12.15 CITY, ST., ZIP: <b>VPAS</b>	<input type="checkbox"/> DELETE	13.15 STREET ADDRESS: <b>555 RIVER OAKS PKWY.</b>	
12.16 NAME: <b>PORTER, WILLIAM</b>		13.16 CITY, ST., ZIP: <b>SAN JOSE CA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.17 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.17 TITLE: <b>VPAS</b>	<input type="checkbox"/> DELETE
12.18 CITY, ST., ZIP: <b>VPAS</b>	<input type="checkbox"/> DELETE	13.18 NAME: <b>PORTER, WILLIAM</b>	
12.19 NAME: <b>PORTER, WILLIAM</b>		13.19 STREET ADDRESS: <b>555 RIVER OAKS PKWY.</b>	
12.20 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.20 CITY, ST., ZIP: <b>SAN JOSE CA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.21 CITY, ST., ZIP: <b>VPAS</b>	<input type="checkbox"/> DELETE	13.21 TITLE: <b>VPAS</b>	<input type="checkbox"/> DELETE
12.22 NAME: <b>PORTER, WILLIAM</b>		13.22 NAME: <b>PORTER, WILLIAM</b>	
12.23 STREET ADDRESS: <b>555 RIVER OAKS PKWY. SAN JOSE CA</b>		13.23 STREET ADDRESS: <b>555 RIVER OAKS PKWY.</b>	
12.24 CITY, ST., ZIP: <b>VPAS</b>	<input type="checkbox"/> DELETE	13.24 CITY, ST., ZIP: <b>SAN JOSE CA</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(s), 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: **H. RAYMOND BINGHAM EXECUTIVE V.P. & C.F.O.**

1/29/96  
Date: \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (12/95)