

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P21002** (1)

1. Corporation Name  
**FAILURE ANALYSIS ASSOCIATES, INC.**



Principal Place of Business  
**149 COMMONWEALTH DRIVE  
P.O. BOX 3015  
MENLO PARK CA 94025**

Mailing Address  
**149 COMMONWEALTH DRIVE  
P.O. BOX 3015  
MENLO PARK CA 94025**

3. Date Incorporated or Qualified **09/22/1988** 3a. Date of Last Report **05/01/1995**

4. FEI Number **94-1693776** 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 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**RAGAN, LARRY  
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 607.0508, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KEITH, EDWARD J</b>	1.2 NAME	
STREET ADDRESS	<b>1495 PADRE LANE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PEBBLE BCH CA</b>	1.4 CITY-ST-ZIP	
TITLE	<b>DCEO</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MCCARTHY, ROGER L.</b>	2.2 NAME	
STREET ADDRESS	<b>149 COMMONWEALTH DRIVE</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MENLO PK CA</b>	2.4 CITY-ST-ZIP	
TITLE	<b>D</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ARMACOST, SAMUEL H.</b>	3.2 NAME	
STREET ADDRESS	<b>101 CALIFORNIA ST #1420</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SAN FRANCISCO CA</b>	3.4 CITY-ST-ZIP	
TITLE	<b>D</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CROSS, ALEXANDER D.</b>	4.2 NAME	
STREET ADDRESS	<b>1330 O'BRIEN DR.</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MENLO PARK CA</b>	4.4 CITY-ST-ZIP	
TITLE	<b>DP</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GAULKE, MICHAEL R</b>	5.2 NAME	
STREET ADDRESS	<b>149 COMMONWEALTH DR</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MENLO PARK CA</b>	5.4 CITY-ST-ZIP	
TITLE	<b>D</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JOHNSON, ELMER W.</b>	6.2 NAME	
STREET ADDRESS	<b>200 E. RANDOLPH</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CHICAGO IL</b>	6.4 CITY-ST-ZIP	

**900001815639**  
**-05/09/96--01079--032**  
**\*\*\*200.00**

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)(k), 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: *M. R. Gaulke* **MICHAEL R. GAULKE** APRIL 30, 1996 415 688-7070

CR2E034 (12/95)