

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P33991** (1)

1. Corporation Name
INFORMIX SOFTWARE, INC.



Principal Place of Business: **ATTN: LEGAL DEPT., 4100 BOHANNON MENLO PARK CA 94025**
Mailing Address: **ATTN: LEGAL DEPT., 4100 BOHANNON MENLO PARK CA 94025**

2. Principal Place of Business: 21 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30 Country

3. Date Incorporated or Qualified: **05/14/1991**
3a. Date of Last Report: **04/26/1995**
4. FEI Number: **36-3113919**
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

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH 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; 85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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	
TITLE	V <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERGANDI, FRANK	1.2 NAME	
STREET ADDRESS	1700 HIGGINS RD., SUITE 420	1.3 STREET ADDRESS	
CITY-STATE-ZIP	DES PLAINES IL	1.4 CITY-STATE-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOSS, RICHARD C.	2.2 NAME	
STREET ADDRESS	4100 BOHANNON DR.	2.3 STREET ADDRESS	
CITY-STATE-ZIP	MENLO PARK CA	2.4 CITY-STATE-ZIP	
TITLE	TV <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRAUNS, MARGARET R	3.2 NAME	
STREET ADDRESS	4100 BOHANNON DRIVE	3.3 STREET ADDRESS	
CITY-STATE-ZIP	MENLO PARK CA	3.4 CITY-STATE-ZIP	
TITLE	PCD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITE, PHILLIP E.	4.2 NAME	
STREET ADDRESS	4100 BOHANNON DR.	4.3 STREET ADDRESS	
CITY-STATE-ZIP	MENLO PARK CA	4.4 CITY-STATE-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAHAM, HOWARD H	5.2 NAME	
STREET ADDRESS	4100 BOHANNON DRIVE	5.3 STREET ADDRESS	
CITY-STATE-ZIP	MENLO PARK CA	5.4 CITY-STATE-ZIP	
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOMMER, STEVEN R.	6.2 NAME	
STREET ADDRESS	4100 BOHANNON DR.	6.3 STREET ADDRESS	
CITY-STATE-ZIP	MENLO PARK CA	6.4 CITY-STATE-ZIP	

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: *Margaret R. Brauns* 2/7/96 (415) 926-6300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE OF FILING DAY OF FILING

CR2E034 (12/95)