

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000493

FILED
May 08, 2009
Secretary of State

Entity Name: EMBARCADERO TECHNOLOGIES, INC.

Current Principal Place of Business:

100 CALIFORNIA ST. 12TH FL
SAN FRANCISCO, CA 94111

New Principal Place of Business:

Current Mailing Address:

100 CALIFORNIA ST. 12TH FL
SAN FRANCISCO, CA 94111

New Mailing Address:

FEI Number: 68-0310015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTIERREZ, ENRIQUE
4198 LAUREL RIDGE CIR
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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:

Title: CFO () Delete
Name: LINES, JAMES
Address: 100 CALIFORNIA ST. 12TH FL
City-St-Zip: SAN FRANCISCO, CA 94111

Title: D () Delete
Name: BRAVO, ORLANDO
Address: 600 MONTGOMERY STREET, 32ND FL
City-St-Zip: SAN FRANCISCO, CA 94111

Title: CEO () Delete
Name: WILLIAMS, WAYNE
Address: 100 CALIFORNIA ST. 12TH FL
City-St-Zip: SAN FRANCISCO, CA 94111

Title: D () Delete
Name: BERNARD, MARCEL
Address: 600 MONTGOMERY STREET, 32ND FL
City-St-Zip: SAN FRANCISCO, CA 94111

Title: D () Delete
Name: CRABILL, SCOTT
Address: 600 MONTGOMERY STREET, 32ND FL
City-St-Zip: SAN FRANCISCO, CA 94111

Title: D () Delete
Name: SPAHT, HOLDEN
Address: 600 MONTGOMERY STREET, 32ND FL
City-St-Zip: SAN FRANCISCO, CA 94111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: JAMES LINES

_____ Electronic Signature of Signing Officer or Director

MR.

05/08/2009

_____ Date