2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003410

Entity Name: SECUREWORKS, INC.

FILED Jun 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
11 EXECUTIVE PARK DRIVE NE ATLANTA, GA 30329				ONE CONCOURSE PARKWAY, SUITE 500 ATLANTA, GA 30328		
Current Ma	ailing Addres	ss:		New Maili	ling Address:	
P.O. BOX 95007 ATLANTA, GA 30329				ONE CONCOURSE PARKWAY, SUITE 500 ATLANTA, GA 30328		
FEI Number:	26-2032356	FEI Number Applied For ()	FEI Nun	nber Not Appl	plicable () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:		Name and	d Address of New Registered Agent:	
1201 HAYS TALLAHAS	S STREET SSEE, FL 323 named entity		ırpose o	of changing i	its registered office or registered agent, or bo	
SIGNATUR	RE:					
	Electron	nic Signature of Registered Ager	nt		Date	
Election Carr	npaign Financin S AND DIREC	3(2)(b), F.S., the corporation did not g Trust Fund Contribution (). TORS:		-	NS/CHANGES TO OFFICERS AND DIRECT	
Name: Address: City-St-Zip:	COTE, MIKE	PARK DRIVE NE		Name: Address: City-St-Zip:	COTE, MIKE ONE CONCOURSE PARKWAY, SUITE 500	
Title: Name: Address: City-St-Zip:	VANDIVER, MI	PARK DRIVE NE		Title: Name: Address: City-St-Zip:	SCFO (X) Change () Addition VANDIVER, MICHAEL ONE CONCOURSE PARKWAY, SUITE 500 ATLANTA, GA 30328	
Title: Name: Address: City-St-Zip:	D (EVANS, WILLI 5765 HERSHIN JOHN CREEK,	IGER CLOSE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TAETLE, ALÂN	(WAY SQ. 4200 NORTHSIDE PKWY N	IVV	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PANTON, DAVI	AD PLZ, 3060 PEACHTREE RD ST 780)	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (DRAKE, ETHAI 201 MERRITT NORWALK, CT	7		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: RENEE PRINCE CONT 06/18/2009