2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2016
Secretary of State
CC1573190669

DOCUMENT# F96000002463

Entity Name: COMMVAULT SYSTEMS, INC.

Current Principal Place of Business:

1 COMMVAULT WAY
TINTON FALLS, NJ 07724

Current Mailing Address:

1 COMMVAULT WAY
TINTON FALLS, NJ 07724 US

FEI Number: 22-3447504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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

Officer/Director Detail :

Title	CEO
Name	HAMMER, ROBERT
Address	1 COMMVAULT WAY
City-State-Zip:	TINTON FALLS NJ 07724

Title	D
Name	PULVER, DAN
Address	3 HAWTHORNE PLACE
City-State-Zip:	SUMMIT NJ 07901

Title	D
Name	GEESLIN, KEITH
Address	2882 SAND HILL RD, SUITE 280
City-State-Zip:	MENLO PARK CA 94025

Title	VP & CFO
Name	CAROLAN, BRIAN
Address	1 COMMVAULT WAY
City-State-Zip:	TINTON FALLS NJ 07724

Title	COO
Name	BUNTE, AL
Address	1 COMMVAULT WAY
City-State-Zip:	TINTON FALLS NJ 07724

Title	D
Name	FANZILLI, FRANK
Address	5 OLD LANTERN PLACE
City-State-Zip:	NORWALK CT 06851

Title	D
Name	KURIMSKY, ROBERT
Address	14 SHORE HAVEN ROAD
City-State-Zip:	EAST NORWALK CT 06880

Title	VP, GENERAL COUNSEL
Name	MONDSCHEIN, WARREN
Address	1 COMMVAULT WAY
City-State-Zip:	TINTON FALLS NJ 07724

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I hereby 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 all other like empowered.

SIGNATURE: BRIAN CAROLAN VP&CFO 03/31/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GEDAY, ARMANDO
Address	620 WEST 42ND STREET
City-State-Zip:	NEW YORK NY 10036

Title	DIRECTOR
Name	SMITH, GARY
Address	7035 RIDGE ROAD
City-State-Zip:	HANOVER MD 20176

Title	DIRECTOR
Name	WALKER, DAVID
Address	14388 EAGLE POINTE DRIVE
City-State-Zip:	CLEARWATER FL 33762