

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90023 013 \*\*\*150.00

**DOCUMENT # 519990**

1. Entity Name  
**ROBERT HALF INCORPORATED**



Principal Place of Business  
**2884 SAND HILL ROAD  
SUITE 200  
MENLO PARK, CA 94025**

Mailing Address  
**2884 SAND HILL ROAD  
SUITE 200  
MENLO PARK, CA 94025**

**54034039**



01052004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**13-6152063**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324-5841**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME MESSMER, HAROLD M JR  
STREET ADDRESS 2884 SAND HILL ROAD SUITE 200  
CITY-ST-ZIP MENLO PARK, CA 94025

TITLE VPTD  
NAME WADDELL, M. KEITH  
STREET ADDRESS 2884 SAND HILL ROAD SUITE 200  
CITY-ST-ZIP MENLO PARK, CA 94025

TITLE SVP  
NAME GLASS, ROBERT W  
STREET ADDRESS 2884 SAND HILL ROAD SUITE 200  
CITY-ST-ZIP MENLO PARK, FL 94025

TITLE VS  
NAME KAREL, STEVEN  
STREET ADDRESS 2884 SAND HILL ROAD SUITE 200  
CITY-ST-ZIP MENLO PARK, CA 94025

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**Robert Half Incorporated**  
SIGNATURE: By: M. Keith Waddell M. Keith Waddell, Vice President 4/2/04 (650) 234-  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 6000