

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 821393

FILED  
Mar 02, 2010  
Secretary of State

Entity Name: RADIOSHACK CORPORATION

**Current Principal Place of Business:**

300 RADIOSHACK CIRCLE  
CF3  
FORT WORTH, TX 76102 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 961090  
CF 4-340  
FORT WORTH, TX 76161 US

**New Mailing Address:**

FEI Number: 75-1047710      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: VS  
Name: DONOHOO, ROBERT C  
Address: 300 RADIOSHACK CIRCLE CF4  
City-St-Zip: FORT WORTH, TX 76102

Title: CD  
Name: FALCONE, ROBERT S  
Address: 1676 INTERNATIONAL DR.  
City-St-Zip: MC LEAN, VA 22102

Title: D  
Name: PLASKETT, THOMAS  
Address: 200 PARK AVE  
City-St-Zip: NEW YORK, NY 10166

Title: VT  
Name: BARFIELD, MARK W  
Address: 300 RADIOSHACK CIRCLE  
City-St-Zip: FORT WORTH, TX 76102

Title: P  
Name: DAY, JULIAN C  
Address: 300 RADIOSHACK CIRCLE CF3  
City-St-Zip: FORT WORTH, TX 76102

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: MARK W BARFIELD

VT

03/02/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date