2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# 845016

Entity Name: ROBERT HALF INTERNATIONAL INC.

Current Principal Place of Business:

2884 SAND HILL RD., SUITE 200
MENLO PARK, CA 94025

New Principal Place of Business:

2884 SAND HILL RD.
SUITE 200
MENLO PARK, CA 94025

Current Mailing Address:

2884 SAND HILL RD., SUITE 200
MENLO PARK, CA 94025

New Mailing Address:

2884 SAND HILL RD.
SUITE 200
MENLO PARK, CA 94025

FEI Number: 94-1648752 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	CEOD	( ) Delete
Name:	MESSMER, HAROLD M JR	
Address:	2884 SAND HILL ROAD SUITE 200	
City-St-Zip:	MENLO PARK, CA 94025	
Title:	PCFO	( ) Delete
Name:	WADDELL, M. KEITH	
Address:	2884 SAND HILL ROAD SUITE 200	
City-St-Zip:	MENLO PARK, CA 94025	
Title:	EVP	( ) Delete
Name:	GLASS, ROBERT W	
Address:	2884 SAND HILL ROAD SUITE 200	
City-St-Zip:	MENLO PARK, CA 94025	
Title:	SVPS	( ) Delete
Name:	KAREL, STEVEN	
Address:	2884 SAND HILL ROAD SUITE 200	
City-St-Zip:	MENLO PARK, CA 94025	
Title:	PCOO	( ) Delete
Name:	GENTZKOW, PAUL	
Address:	2884 SAND HILL ROAD	
City-St-Zip:	MENLO PARK, CA 94025	
Title:	TAS	( ) Delete
Name:	BUCKLEY, MICHAEL	
Address:	2884 SAND HILL RD	
City-St-Zip:	MENLO PARK, CA 94025	

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: EVELYN CRANE-OLIVER VP 04/22/2009

Electronic Signature of Signing Officer or Director — Date