

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007033

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: WIDEVINE TECHNOLOGIES, INC.

## Current Principal Place of Business:

900 4TH AVENUE  
SUITE 3400  
SEATTLE, WA 98164 US

## New Principal Place of Business:

901 5TH AVENUE  
SUITE 3400  
SEATTLE, WA 98164 US

## Current Mailing Address:

900 4TH AVENUE  
SUITE 3400  
SEATTLE, WA 98164 US

## New Mailing Address:

901 5TH AVENUE  
SUITE 3400  
SEATTLE, WA 98164 US

FEI Number: 91-1980543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: PSD ( ) Delete  
Name: BAKER, BRIAN A  
Address: 900 4TH AVE STE 3400  
City-St-Zip: SEATTLE, WA 98164

Title: D ( ) Delete  
Name: BOYD, LISA  
Address: 383 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10179

Title: D ( ) Delete  
Name: RINGO, CYNTHIA  
Address: 1001 BAYHILL DRIVE, SUITE 300  
City-St-Zip: SAN BRUNO, CA 94066

Title: D ( ) Delete  
Name: DAVIDSON, DUNCAN  
Address: 1001 BAYHILL DRIVE, SUITE 300  
City-St-Zip: SAN BRUNO, CA 94066

Title: D ( ) Delete  
Name: FRIEDMAN, CLIFF  
Address: 383 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10179

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON A DAVIS

CFO

04/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date