

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007033

FILED
Mar 11, 2008
Secretary of State

Entity Name: WIDEVINE TECHNOLOGIES, INC.

Current Principal Place of Business:

901 5TH AVENUE
SUITE 3400
SEATTLE, WA 98164 US

New Principal Place of Business:

Current Mailing Address:

901 5TH AVENUE
SUITE 3400
SEATTLE, WA 98164 US

New Mailing Address:

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: PSD (X) Change () Addition
Name: BAKER, BRIAN A
Address: 901 5TH AVE STE 3400
City-St-Zip: SEATTLE, WA 98164

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: BRIAN A BAKER

CEO

03/11/2008

Electronic Signature of Signing Officer or Director

_____ Date