## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000003563

Entity Name: OVERLAND STORAGE, INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:		
4820 OVEF	RLAND AVENU D, CA 92123				
Current Mailing Address:			New Maili	New Mailing Address:	
4820 OVERLAND AVENUE SAN DIEGO, CA 92123					
FEI Number:	95-3535285	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US  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.					
SIGNATUR					
SIGNATOR		ic Signature of Registered Ager	nt	 Date	
Election Carr		Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS: ADDI			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	MCCENDON, S 4820 VOERLAN SAN DIEGO, CA	ID AVENUE A 92123 Delete PRTI A ID AVENUE	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	CD (X) Change ( ) Addition MCCENDON, SCOTT 4820 OVERLAND AVENUE SAN DIEGO, CA 92123  CEOD (X) Change ( ) Addition KELLY, ERIC 4820 OVERLAND AVENUE SAN DIEGO, CA 92123	
Title: Name: Address: City-St-Zip: Title: Name: Address:	MILLER, WILLIA 4820 OVERLAN SAN DIEGO, CA	ID AVENUE A 92123 Delete KURT L	Title: Name: Address: City-St-Zip: Title: Name: Address:	PS (X) Change ( ) Addition LOFORTI, VERNON A 4820 OVERLAND AVENUE SAN DIEGO, CA 92123 ( ) Change ( ) Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	DEGAN, ROBER 4820 OVERLAN SAN DIEGO, CA	Delete RT ID AVENUE A 92123 Delete DRTI ID AVENUE	City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition  D (X) Change ( ) Addition  MILLER, WILLIAM  4820 OVERLAND AVENUE  SAN DIEGO, CA 92123	

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: VERNON A. LOFORTI PS 03/20/2009