2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2005
Secretary of State

DOCUMENT# F01000003858

Entity Name: MCAFEE, INC.

Current Principal Place of Business:

3965 FREEDOM CIRCLE
SANTA CLARA, CA 95054

New Principal Place of Business:

Current Mailing Address:

3965 FREEDOM CIRCLE
SANTA CLARA, CA 95054

New Mailing Address:

5000 HEADQUARTERS DRIVE
PLANO, TX 75024

FEI Number: 77-0316593 **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: CD ( ) Delete
Name: SAMENUK, GEORGE
Address: 3965 FREEDOM CIRCLE
City-St-Zip: SANTA CLARA, CA 95054

Title: P ( ) Delete
Name: HODGES, GENE
Address: 3965 FREEDOM CIRCLE
City-St-Zip: SANTA CLARA, CA 95054

Title: S ( ) Delete
Name: ROBERTS, KENT
Address: 3965 FREEDOM CIRCLE
City-St-Zip: SANTA CLARA, CA 95054

Title: D ( ) Delete
Name: DUTKOWSKY, ROBERT
Address: 3965 FREEDOM CIRCLE
City-St-Zip: SANTA CLARA, CA 95054

Title: D ( ) Delete
Name: DENEND, LES
Address: 3965 FREEDOM CIRCLE
City-St-Zip: SANTA CLARA, CA 95054

Title: D ( ) Delete
Name: PANGIA, ROBERT
Address: 3965 FREEDOM CIRCLE
City-St-Zip: SANTA CLARA, CA 95054

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 for the exemption stated in Section 119.07(3)(i), 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: KENT ROBERTS S 07/14/2005

Electronic Signature of Signing Officer or Director Date