## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000003858

Entity Name: MCAFEE, INC.

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3965 FREEDOM CIR SANTA CLARA, CA 95054 **Current Mailing Address: New Mailing Address:** 5000 HEADQUARTERS DR. MS 2SAP 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: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFOP ( ) Delete () Change () Addition Name: DEWALT, DAVID Name: 3965 FREEDOM CIRCLE Address: Address: City-St-Zip: SANTA CLARA, CA 95054 City-St-Zip: EVP Title: Title: () Delete () Change () Addition Name: **BOLIN. CHRISTOPHER** Name: 3965 FREEDOM CIRCLE Address: Address: SANTA CLARA, CA 95054 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition DENEND, LESLIE Name: Name: 3965 FREEDOM CIRCLE Address: Address: City-St-Zip: SANTA CLARA, CA 95054 City-St-Zip: ( ) Delete Title: Title: () Change () Addition PANGIA, ROBERT Name: Name: Address: 3965 FREEDOM CIRCLE Address: City-St-Zip: SANTA CLARA, CA 95054 City-St-Zip: Title: Title: CFO () Delete ( ) Change (X) Addition Name: Name: PIMENTEL, ALBERT A Address: 3965 FREEDOM CIRCLE Address: City-St-Zip: City-St-Zip: SANTA CLARA, CA 95054 Title: () Delete Title: ( ) Change (X) Addition KRZEMINSKI, KEITH S Name: Name: Address: Address: 5000 HEADQUARTERS DR City-St-Zip: City-St-Zip: PLANO, TX 75024

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: KEITH S KRZEMINSKI CAO 04/28/2009