

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # F02000003591	
1. Entity Name PROTIVITI INC.	



Principal Place of Business 2884 SAND HILL ROAD, SUITE 200 MENLO PARK, CA 94025	Mailing Address 2884 SAND HILL ROAD, SUITE 200 MENLO PARK, CA 94025
---	---



04062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3661951	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
--

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	04/19/05-80082-013 150.00
---	---	---------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WADDELL, M. KEITH 2884 SAND HILL ROAD, SUITE 200 MENLO PARK, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GLASS, ROBERT W 2884 SAND HILL ROAD, SUITE 200 MENLO PARK, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO BUCKLEY, MICHAEL 2884 SAND HILL ROAD, SUITE 200 MENLO PARK, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MESSMER, JR., HAROLD 2884 SAND HILL ROAD MENLO PARK, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GENTZKOW, PAUL 2884 SAND HILL ROAD MENLO PARK, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

Protiviti Inc.
SIGNATURE: By: M. Keith Waddell M. Keith Waddell, Pres. 4/6/05 (650) 234-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #