


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F03000000503 1. Entity Name THE MATHWORKS, INC.	
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Principal Place of Business 3 APPLE HILL DRIVE NATICK, MA 01760	Mailing Address 3 APPLE HILL DRIVE NATICK, MA 01760
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DO NOT WRITE IN THIS SPACE



05162006 No Chg-P CR2E034 (11/05)

4. FEI Number 94-2960235	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required	

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE	C
NAME	MOLER, CLEVE B
STREET ADDRESS	3 APPLE HILL DRIVE
CITY-ST-ZIP	NATICK, MA 01760
TITLE	DP
NAME	LITTLE, JOHN N
STREET ADDRESS	3 APPLE HILL DRIVE
CITY-ST-ZIP	NATICK, MA 01760
TITLE	S
NAME	SPERA, THOMAS M
STREET ADDRESS	3 APPLE HILL DRIVE
CITY-ST-ZIP	NATICK, MA 01760
TITLE	T
NAME	O'KEEFE, JEANNE M
STREET ADDRESS	3 APPLE HILL DRIVE
CITY-ST-ZIP	NATICK, MA 01760
STREET ADDRESS	
CITY-ST-ZIP	

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000000565775
05/22/06-80011-021 150.00

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information provided 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 applicable, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeane O'Keefe Jeane O'Keefe 5-16-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #