2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 16, 2009
Secretary of State

DOCUMENT# F04000002538

Entity Name: ONTRACK DATA RECOVERY, INC.

Current Principal Place of Business:

9023 COLUMBINE ROAD
EDEN PRAIRIE, MN 55347 US

New Principal Place of Business:

Current Mailing Address:

9023 COLUMBINE ROAD
EDEN PRAIRIE, MN 55347 US

New Mailing Address:

FEI Number: 41-1613148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: BEN
Address: 1166 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10036 US

Title: P ( ) Delete
Name: KRISTIN
Address: 9023 COLUMBINE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: V ( ) Delete
Name: THOMAS
Address: 9023 COLUMBINE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: V ( ) Delete
Name: GREGORY
Address: 9023 COLUMBINE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: S ( ) Delete
Name: SABRINA
Address: 1166 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10036 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition
Name: ALLEN, BEN
Address: 1166 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10036 US

Title: P (X) Change ( ) Addition
Name: NIMSGER, KRISTIN
Address: 9023 COLUMBINE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: V (X) Change ( ) Addition
Name: SKIBA, THOMAS
Address: 9023 COLUMBINE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: V (X) Change ( ) Addition
Name: OLSON, GREGORY
Address: 9023 COLUMBINE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: S (X) Change ( ) Addition
Name: PEREL, SABRINA
Address: 1166 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10036 US

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: KRISTIN NIMSGER , PRESIDENT P 07/16/2009

Electronic Signature of Signing Officer or Director Date