

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005433

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: SCK OF DELAWARE, INC.

## Current Principal Place of Business:

300 RADIOSHACK CIRCLE, CF4-101  
FORT WORTH, TX 761021964

## New Principal Place of Business:

350 N HENDERSON ST  
FORT WORTH, TX 761021964

## Current Mailing Address:

PO BOX 961090 CF4 340  
FORT WORTH, TX 76161

## New Mailing Address:

FEI Number: 20-1589220      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: PD ( ) Delete  
Name: GOOCH, JAMES F  
Address: 300 RADIOSHACK CIR  
City-St-Zip: FORT WORTH, TX 761021964

Title: VP ( ) Delete  
Name: MILLS, JIM  
Address: 300 RADIOSHACK CIR  
City-St-Zip: FORT WORTH, TX 76102

Title: VPT ( ) Delete  
Name: BARFIELD, MARK W  
Address: 300 RADIOSHACK CIRCLE  
City-St-Zip: FORT WORTH, TX 761021964

Title: S ( ) Delete  
Name: DONOHOO, ROBERT C  
Address: 300 RADIOSHACK CIRCLE  
City-St-Zip: FORT WORTH, TX 761021964

Title: D ( ) Delete  
Name: MOAD, MARTIN O  
Address: 300 RADIOSHACK CIRCLE  
City-St-Zip: FORT WORTH, TX 761021964

Title: D ( ) Delete  
Name: WHITSETT, PETER J  
Address: 300 RADIOSHACK CIRCLE  
City-St-Zip: FORT WORTH, TX 76102

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: WHIDDON, LAREN  
Address: 300 RADIOSHACK CIR  
City-St-Zip: FORT WORTH, TX 76102

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 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: MARK W BARFIELD

VPT

04/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date