

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F05000003711

FILED
Jan 28, 2010
Secretary of State

Entity Name: ZIPREALTY, INC.

Current Principal Place of Business:

2000 POWELL STREET
SUITE 300
EMERYVILLE, CA 94608

New Principal Place of Business:

Current Mailing Address:

2000 POWELL STREET
SUITE 300
EMERYVILLE, CA 94608

New Mailing Address:

FEI Number: 94-3319956

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

OFFICERS AND DIRECTORS:

Title: CEO
Name: LASHINSKY, JOSEPH PATRICK
Address: 2000 POWELL STREET, SUITE 300
City-St-Zip: EMERYVILLE, CA 94608

Title: ASEC
Name: SCHINDELE, LINDA
Address: 2000 POWELL STREET, SUITE 300
City-St-Zip: EMERYVILLE, CA 94608

Title: EVP
Name: BAKER, CHARLES
Address: 2000 POWELL STREET, SUITE 300
City-St-Zip: EMERYVILLE, CA 94608

Title: SVP
Name: RECTOR, DAVID A
Address: 2000 POWELL STREET, SUITE 300
City-St-Zip: EMERYVILLE, CA 94608

Title: SVP
Name: YAKOMINICH, ROBERT
Address: 2000 POWELL STREET, SUITE 300
City-St-Zip: EMERYVILLE, CA 94608

Title: GCSV
Name: HARNETT, SAMANTHA
Address: 2000 POWELL STREET, SUITE 300
City-St-Zip: EMERYVILLE, CA 94608

I hereby 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 all other like empowered.

SIGNATURE: SAMANTHA HARNETT

GCSV

01/28/2010

Electronic Signature of Signing Officer or Director

Date