

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004221

Entity Name: INTRALINKS, INC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

150 EAST 42ND STREET
8 FLOOR
NEW YORK, NY 10017

New Principal Place of Business:

150 EAST 42ND STREET
8 FLOOR
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 13-3899047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 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: D () Delete
Name: WACK, PATRICK
Address: 150 E 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: CFO () Delete
Name: PLESNER, ANTHONY
Address: 150 E. 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: CEO () Delete
Name: DAMICO, ANDREW
Address: 150 E. 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: CONWAY, BRIAN
Address: 200 CLAREDON STREET
City-St-Zip: BOSTON, MA 02116

Title: D () Delete
Name: BESTHOFF, SKIP
Address: 152 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10015

Title: D () Delete
Name: KAIROUZ, HABIB
Address: 1372 BROADWAY, 11TH FLOOR
City-St-Zip: NEW YORK, NY 10018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

Title: D (X) Change () Addition
Name: KAIROUZ, HABIB
Address: 150 EAST 42ND STREET
City-St-Zip: NEW YORK, NY 10017

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: ANTHONY PLESNER

CFO

04/02/2009

Electronic Signature of Signing Officer or Director

Date