


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F94000005560		
1. Entity Name ATTACHMATE CORPORATION		
Principal Place of Business 1500 DEXTER AVE, N SEATTLE, WA 98109	Mailing Address ACCOUNTS PAYABLE DEPARTMENT 1233 WEST LOOP SOUTH, SUITE 1800 HOUSTON, TX 77027	

FILED
Aug 06, 2008 08:00 AM
Secretary of State



07292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 91-1238718	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

DO NOT WRITE 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 \$550.00
Due by September 12, 2008

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAWN, JEFF 1500 DEXTER AVE, N SEATTLE, WA 98109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARSH, JENNIFER 1500 DEXTER AVE, N SEATTLE, WA 98109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SANSBURY, CHARLES 1500 DEXTER AVE, N SEATTLE, WA 98109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BECK, JAMES 1500 DEXTER AVE, N SEATTLE, WA 98109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLOB, DAVID 2892 SAND HILL RD, STE 280 MENLO PARK, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERLMAN, EZRA 2882 SAND HILL RD, STE 280 MENLO PARK, CA 94025

U00000957145
08/06/08-80001-011 550.00

DO NOT WRITE IN THIS SPACE

12. 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 indicated 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE: James O. Beck Date: 7/31/08 Daytime Phone #: 206-301-6227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR