2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008
Secretary of State

DOCUMENT# F98000005853

Entity Name: QUEST SOFTWARE, INC.

Current Principal Place of Business:

5 POLARIS WAY
ALISO VIEJO, CA 92656

New Principal Place of Business:

Current Mailing Address:

5 POLARIS WAY
ALISO VIEJO, CA 92656

New Mailing Address:

FEI Number: 33-0231678 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: SMITH, VINCENT C
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

Title: D ( ) Delete
Name: DIRKS, H. JOHN
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

Title: CFO ( ) Delete
Name: LAMBERT, MICHAEL J
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

Title: VP ( ) Delete
Name: FOLEY, ANTHONY
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

Title: VPS ( ) Delete
Name: VAUGHN, J. MICHAEL
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

Title: VP ( ) Delete
Name: BROOKS, KEVIN E
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: C (X) Change ( ) Addition
Name: DAVIDSON, SCOTT
Address: 5 POLARIS WAY
City-St-Zip: ALISO VIEJO, CA 92656

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: J. MICHAEL VAUGHN VP 02/25/2008

Electronic Signature of Signing Officer or Director — Date