## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000006163

Entity Name: FAIR ISAAC SOFTWARE, INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
901 MARGUETTE AVENUE SUITE 3200				901 MARQUETTE AVENUE SUITE 3200				
MINNEAPOLIS, MN 55402				MINNEAPOLIS, MN 55402				
Current Mailing Address:				New Mailing Address:				
	I RANCH ROA EAL, CA 94903							
FEI Number:	56-1995017	FEI Number Applied For ( )	FEI Nur	nber Not App	licable ( )	Certificat	e of Status De	sired()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Regi	stered Agen	it:
1201 HAYS	ATION SERVIC S STREET SSEE, FL 3230							
	named entity s of Florida.	submits this statement for the p	ourpose o	of changing i	ts registered	office or re	gistered age	nt, or both,
SIGNATUR	RE:							
	Electron	ic Signature of Registered Age	ent				Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	GREENE, MARI	ΓΕ AVENUE, STE 3200		Title: Name: Address: City-St-Zip:	(	) Change(	) Addition	
Title: Name: Address: City-St-Zip:	OSBORNE, CHA	ΓΕ AVENUE, STE 3200		Title: Name: Address: City-St-Zip:	DCFO (X BRADLEY, TH 901 MARGUE MINNEAPOLIS	TTE AVENUE	E, STE 3200	
Title: Name: Address: City-St-Zip:	SCADINA, MAR	ΓΕ AVENUE, STE 3200		Title: Name: Address: City-St-Zip:	(	) Change(	) Addition	
Title: Name: Address: City-St-Zip:	AS () FRASER, NANC 200 SMITH RAN SAN RAFAEL, C	CY E ICH ROAD		Title: Name: Address: City-St-Zip:	(	) Change(	) Addition	
Title: Name: Address: City-St-Zip:	EMERICK, JOH	ΓΕ AVENUE, STE 3200		Title: Name: Address: City-St-Zip:	(	) Change(	) Addition	
Title: Name: Address: City-St-Zip:	CAMPBELL, MI	ΓΕ AVENUE, STE 3200		Title: Name: Address: City-St-Zip:	(	) Change(	) Addition	

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: NANCY E. FRASER AS 04/30/2009