2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20133

Entity Name: NOVELL, INC.

FILED Jan 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1800 S NOVELL PLACE PRV-H-544 PROVO, UT 846066194 US **Current Mailing Address: New Mailing Address:** 1800 S NOVELL PLACE PRV-H-544 (ATTN: SUE GOODWILL) PROVO, UT 846066194 US FEI Number: 87-0393339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** () Delete Title: () Change () Addition HOVSEPIAN, RONALD W Name: Name: 404 WYMAN ST., STE. 500 Address: Address: City-St-Zip: WALTHAM, MA 02451 City-St-Zip: CFO Title: Title: () Delete () Change () Addition Name: RUSSELL, DANA C Name: 404 WYMAN ST., STE. 500 Address: Address: WALTHAM, MA 02451 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PODUSKA, JOHN W Name: Name: 295 MEADOWBROOK RD. Address: Address: City-St-Zip: WESTON, MA 02493 City-St-Zip: Title: () Delete Title: () Change () Addition ROBINSON, JAMES D III Name: Name: Address: 126 E 56 ST., 22 FLOOR Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: Title: Title: SRVP () Delete (X) Change () Addition LASALA, JOSEPH A JR. Name: FRIEDMAN, ALAN J Name: 404 WYMAN ST., STE, 500 Address: 404 WYMAN ST., STE, 500 Address: City-St-Zip: WALTHAM, MA 02451 City-St-Zip: WALTHAM, MA 02451 Title: **VPAS** () Delete Title: () Change () Addition RYAN, RICHARDS Name: Name: Address: 1800 S NOVELL PLACE Address: City-St-Zip: City-St-Zip: PROVO. UT 84604

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: RYAN L. RICHARDS VPAS 01/15/2008