## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P35713

Entity Name: RSA SECURITY INC.

FILED Mar 12, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
174 MIDDLESEX TURNPIKE BEDFORD, MA 01730					
Current Mailing Address:			New Mailing Address:		
174 MIDDLESEX TURNPIKE BEDFORD, MA 01730					
FEI Number: (	04-2916506	FEI Number Applied For ( ) FEI Nur	nber Not Appli	licable ( ) Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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:					
	Electror	ic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEOP ( ) COVIELLO, AR 174 MIDDLESE BEDFORD, MA	EX TURNPIKE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFP ( ) COVIELLO, AR 174 MIDDLESE BEDFORD, MA	EX TURNPIKE	Title: Name: Address: City-St-Zip:	VP/D (X) Change ( ) Addition DACIER, PAUL T 176 SOUTH STREET HOPKINTON, MA 0'748	
Title: Name: Address: City-St-Zip:	VPS ( ) NAULT, ROBER 174 MIDDLESE BEDFORD, MA	EX TURNPIKE	Title: Name: Address: City-St-Zip:	T/D (X) Change ( ) Addition TEUBER, WILLIAM J JR. 176 SOUTH STREET HOPKINTON, MA 01748	
Title: Name: Address: City-St-Zip:	T () LEMAY, BRIAN 174 MIDDLESE BEDFORD, MA	X TURNPIKE	Title: Name: Address: City-St-Zip:	S/D (X) Change ( ) Addition PERMUT, SUSAN I 176 SOUTH STREET HOPKINTON, MA 01748 US	
Title: Name: Address: City-St-Zip:	D (X BADAVAS, ROB 174 MIDDLESE BEDFORD, MA	EX TURNPIKE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X EARNEST, RIC 174 MIDDLESE BEDFORD, MA	X TURNPIKE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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. VΡ 03/12/2007

SIGNATURE: PAUL T. DACIER

Date