

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000003138

**FILED**  
**Jul 11, 2016**  
**Secretary of State**  
**CC0364058640**

**Entity Name:** MALWAREBYTES CORPORATION

**Current Principal Place of Business:**

3979 FREEDOM CIRCLE  
12TH FLOOR  
SANTA CLARA, CA 95054

**Current Mailing Address:**

3979 FREEDOM CIRCLE  
12TH FLOOR  
SANTA CLARA, CA 95054 US

**FEI Number:** 26-2774858

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:** JASONSAHAM

07/11/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name KLECZYNSKI, MARCIN  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title OFFICER  
Name SWANSON, DOUGLAS  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title VP  
Name HARRISON, BRUCE  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title CFO  
Name HARRIS, MARK  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR  
Name MULLOY, COREY  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR  
Name SEAWELL, BROOKE  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR  
Name SOMAINI, JUSTIN  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR  
Name ECKELBERRY, ALEX  
Address 3979 FREEDOM CIRCLE  
12TH FLOOR  
City-State-Zip: SANTA CLARA CA 95054

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARK HARRIS

CFO

07/11/2016

Electronic Signature of Signing Officer/Director Detail

Date