

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24091

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** INTEL CORPORATION

**Current Principal Place of Business:**

2200 MISSION COLLEGE BLVD.  
SANTA CLARA, CA 950541537 US

**New Principal Place of Business:**

**Current Mailing Address:**

2200 MISSION COLLEGE BLVD.  
RNB-5-125  
SANTA CLARA, CA 950541537 US

**New Mailing Address:**

**FEI Number:** 94-1672743      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
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

**OFFICERS AND DIRECTORS:**

**Title:** VPT  
**Name:** JACOB, RAVI  
**Address:** 2200 MISSION COLLEGE BLVD  
**City-St-Zip:** SANTA CLARA, CA 950541537 US

**Title:** VP  
**Name:** BRYANT, ANDY D  
**Address:** 2200 MISSION COLLEGE BLVD  
**City-St-Zip:** SANTA CLARA, CA 950541537 US

**Title:** S  
**Name:** KLAFTER, CARY I  
**Address:** 2200 MISSION COLLEGE BLVD  
**City-St-Zip:** SANTA CLARA, CA 950541537 US

**Title:** CEOP  
**Name:** OTELLINI, PAUL S  
**Address:** 2200 MISSION COLLEGE BLVD  
**City-St-Zip:** SANTA CLARA, CA 950541537 US

**Title:** AVP  
**Name:** DICKEL, RONALD D  
**Address:** 2200 MISSION COLLEGE BLVD  
**City-St-Zip:** SANTA CLARA, CA 950541537 US

**Title:** D  
**Name:** SHAW, JANE E  
**Address:** 2200 MISSION COLLEGE BLVD.  
**City-St-Zip:** SANTA CLARA, CA 950541537 US

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: RONALD D. DICKEL

AVP

05/01/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date