

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Apr 02, 1999 8:00 am**  
**Secretary of State**

04-02-1999 90013 008 \*\*\*150.00

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PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 853146**

1. Corporation Name  
**APPLE COMPUTER, INC.**

Principal Place of Business  
**APPLE COMPUTER, INC**  
**ONE INFINITE LOOP MS: 36 TX**  
**CUPERTINO CA 95014**  
**US**

Mailing Address  
**APPLE COMPUTER, INC.**  
**ONE INFINITE LOOP MS: 36 TX**  
**CUPERTINO CA 75014**  
**US**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**06/18/1982**

4. FEI Number  
**94-2404110**

5. Certificate of Status Desired  **\$8.75-Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business	2a. Mailing Address
21 <b>Apple Computer, Inc</b>	26 <b>Apple Computer, Inc</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <b>One Infinite Loop</b>	27 <b>One Infinite Loop 301-30x</b>
City & State	City & State
23 <b>Cupertino, CA</b>	28 <b>Cupertino, CA</b>
Zip Country	Zip Country
24 <b>95014 US</b>	29 <b>95014 US</b>

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	JONS, STEVEN	
STREET ADDRESS	ONE INFINITE LOOP	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	CFO	<input type="checkbox"/> DELETE
NAME	ANDERSON, FRED D.	
STREET ADDRESS	ONE INFINITE LOOP	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	HEIN, NANCY	
STREET ADDRESS	ONE INFINITE LOOP	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	RUBINSTEIN, JON	
STREET ADDRESS	ONE INFINITE LOOP	
CITY-ST-ZIP	CUPERTINO CA	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	TEVANIAN, AVIE	
STREET ADDRESS	20525 MARIANI AVE.	
CITY-ST-ZIP	CUPERTINO CA 95014	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Interim CEO</b>
1.3 STREET ADDRESS	<b>Steven Jons</b>
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: \_\_\_\_\_ Date **3/9/99**  
 Signature and typed or printed name of signing officer or director

CR2E034 (1/198)

List of Officers 1999

853146  
284114 90013.8

✓ Nicholas Postak Pres

✓ Roy Lyon 1st VP

Jere Doyle 2nd VP

Louise Van Gemen Treas

Fran Small Secy.

Don Schmidt Dir

Earl McNeil Dir

TANGLEWOOD M.V.  
CONDO ASSOCIATION, INC.  
3309 CHANNING DRIVE  
HOLIDAY, FLORIDA 34690