PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kathorine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90008 045 \*\*\*150.00

## DOCUMENT # P98000066003

1. Corporation	NETWORK ASSOCIATES, II								
Principal Place of Business Mailing Address						- E SUBSTUTUL DEN TOTAN SERIT DEN DE ANGESE ANDERD	Aftist maste attin	88187 (UI 198)	
1278 STADT ROAD N.W. 1278 STADT RO.			ROAD N.W.			ì			
PALM BAY FL 32907		PALM BAY FL 32907				DO NOT WRITE IN THIS SPACE			
						3. Date incorporated or Qualified	SPACE		1
						07/28/1998		•	1
A O Incl D	lace of Business	2a. Mailing Address				A. FEI Number	I Ao	plied For	l
21		26				59-3524425	No	l Applicable	1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Cartificate of Status Desired	\$8.75 A		
22		27				<del> </del>		<del>`</del>	}
City & State	•	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added		
23 Zin	Country	28 Zip	Cou	intry		8. This corporation owes the current year in			1
~ <del></del>		<del></del>	~ <del>` </del>			Personal Property Tax.	☐ Yes	□No_	1
24	9. Name and Address of Current	<del></del>	301	T		10. Name and Address of New Registered	Agent		1
				81 Na	me				1
	ILLINGER, CHARLES A			82 Sir	oet Addre	ss (P.O. Box Number is Not Acceptable)			1
	E 200	az Sueet Audi		ogt Hadrin	25 (1.0) 250 100 100 100 100 100 100 100 100 100 1			]	
WES	T MELBOURNE FL 32904			83					l
				84 Cit			85 Zip (	Code	t
				1 1 '	•	FL			1
SIGNATURE						retion submits this statement for the purpose of l'a board of directors. I hereby accept the appoi	niment as re	gistered	
	Signature, typed or printed name of registered egent				princes early	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	OFFICERS AND DIRECTORS  DELETE		_	13.		ADDITIONS/OFFICE TO CONTROL TO CO	Change	Addition	] =
TITLE	DEL RIO, OSCAR		1.2 N		Ì				X
NAME STREET ADDRESS	1278 STADT ROAD N.W.		-	REET ADDR	ESS				CRZE034 (11/98)
*	PALM BAY FL 32907			TY-8T-ZIP				_	2
TITLE			_	21 TITLE			Change	Addition	O.
NAME	DEL RIO, MADELEINE J			22 NAME					
STREET ADDRESS	—		2351	23 STREET ADDRESS					ł
CITY-ST-ZIP	PALM BAY FL 32907			2.4 CiTY-ST-ZIP					]
TITLE		DELETE 3.17		TLE			Change	☐ Addition	}
NAME	32		32 N	NAME				İ	
- RTREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		្នារន	3.3 STREET ADDRESS					}
CITY-ST-ZIP			3.4.0	3.4. CITY-ST-ZIP				[**] A 4404:	1
πLE	•	_		1 TILE			Change	Addition	
NAME .			4 2 NAME		- 1				l
STREET ADDRESS	•		4.3 \$1	REET ADOR	ESS				ļ
CITY-ST-ZIP				TY-ST-ZP			Change	Addition	ł
TITLE		•		5.1 TILE			Понийа	(100mm)	]
NAME	1 <sup>32</sup>		•	5.2 NAME 5.3 STREET ADDRESS					}
STREET ADDRESS					200				1
CATY-ST-ZP		TI NELETE	5.4 CI	TY-ST-ZIP			Change	Addition	{
TITLE		☐ DELETE		ME.					
NAME	· :			REET ADDR	ESS				1
STREET ADDRESS									Į

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 suppliemental 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 chapter 607 or an attachment with an address, with all others the empowered.

SIGNATURE:

MADELEINE J. DEL RIO

3/15/99 407-674-9888