

1.) CORPORATION NAME:

JDS Uniphase Corporation

DUE DATE: **4/30/2011**

SCC ID NO: **F1823345**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
OTH	99,999,999,999
	9

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 430 N MCCARTHY BLVD

CITY/ST/ZIP: MILPITAS, CA 95035-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DAVID VELLEQUETTE
TITLE: EVP/CFO
ADDRESS: 430 N MCCARTHY BLVD
CITY/ST/ZIP/CO: MILPITAS, CA 95035-

OFFICER

DIRECTOR

NAME: THOMAS WAECHTER
TITLE: CEO/PRES
ADDRESS: 430 N MCCARTHY BLVD
CITY/ST/ZIP/CO: MILPITAS, CA 95035-

OFFICER

DIRECTOR

NAME: ANDREW POLLACK
TITLE: SECRETARY
ADDRESS: 430 NORTH MCCARTHY BLVD.
CITY/ST/ZIP/CO: MILPITAS, CA 95035-

OFFICER

DIRECTOR

NAME: MARTIN KAPLAN
TITLE: CHAIRMAN
ADDRESS: 430 NORTH MCCARTHY BLVD.
CITY/ST/ZIP/CO: MILPITAS, CA 95035-

OFFICER

DIRECTOR

NAME: KEVIN KENNEY
TITLE: VICE CHAIRMAN
ADDRESS: 430 NORTH MCCARTHY BLVD.
CITY/ST/ZIP/CO: MILPITAS, CA 95035-

OFFICER

DIRECTOR

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	HAROLD COVERT		
TITLE:	DIRECTOR		
ADDRESS:	430 NORTH MCCARTHY BLVD.		
CITY/ST/ZIP/CO:	MILPITAS, CA 95035-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PENNY HERSCHER		
TITLE:	DIRECTOR		
ADDRESS:	430 NORTH MCCARTHY BLVD.		
CITY/ST/ZIP/CO:	MILPITAS, CA 95035-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MASOOD JABBAR		
TITLE:	DIRECTOR		
ADDRESS:	430 NORTH MCCARTHY BLVD.		
CITY/ST/ZIP/CO:	MILPITAS, CA 95035-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RICHARD LIEBHABER		
TITLE:	DIRECTOR		
ADDRESS:	430 NORTH MCCARTHY BLVD.		
CITY/ST/ZIP/CO:	MILPITAS, CA 95035-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CASIMIR SKRZYPCZAK		
TITLE:	DIRECTOR		
ADDRESS:	430 NORTH MCCARTHY BLVD.		
CITY/ST/ZIP/CO:	MILPITAS, CA 95035-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RICHARD BELLUZZO		
TITLE:	DIRECTOR		
ADDRESS:	430 NORTH MCCARTHY BLVD.		
CITY/ST/ZIP/CO:	MILPITAS, CA 95035-		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ ANDREW POLLACK</u>	<u>ANDREW POLLACK, SECRETARY</u>	<u>6/2/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.