2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: MARSHA L. REED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # P17652 Apr 22, 2000 8:00 am 1. Entity Name Secretary of State **EURO DISNEY CORPORATION** 04-22-2000 90050 018 ***150.00 Mailing Address Principal Place of Business 2. Principal Place of Business 3. Mailing Address 500 SOUTH BUENA VISTA STREET 500 SOUTH BUENA VISTA STREET DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 95-4109138 Not Applicable BURBANK, CA BURBANK, CA Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 91521 91521-0586 US ____ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name IOPPOLO, FRANK S. Street Address (P.O. Box Number is Not Acceptable) 1375 BUENA VISTA DRIVE 4TH FLOOR NORTH LAKE BUENA VISTA, FL 32830 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change Addition TITLE TITLE Delete PD NAME NAME GREEN, JUDSON C. STREET ADDRESS STREET ADDRESS 500 SOUTH BUENA VISTA STREET CITY-ST-ZIP CITY-ST-ZIP BURBANK, CA 91521 ☐ Addition ☐ Change ☐ Defete TITLE TITLE NAME NAME REED, MARSHA L. STREET ADDRESS STREET ADDRESS 500 SOUTH BUENA VISTA STREET CITY-ST-ZIP CITY-ST-ZIP BURBANK, CA 91521 Addition Change TITLE ☐ Defete TITLE NAME NAME LITYACK, SANFORD M. STREET ADDRESS STREET ADDRESS **500 SOUTH BUENA VISTA STREET** CITY-ST-ZIP CITY-ST-ZIP BURBANK, CA 91521 Addition ☐ Change ☐ Delete TITLE AT NAME NAME BUETTNER, ANNE L. STREET ADDRESS STREET ADDRESS **500 SOUTH BUENA VISTA STREET** CITY-ST-ZIP CITY-ST-ZIP BURBANK, CA 91521 Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME HANFORD, JAMES D. STREET ADDRESS STREET ADDRESS 500 SOUTH BUENA VISTA STREET. CITY-ST-ZIP CITY-ST-ZIP BURBANK, CA 91521---☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

4-6-00

(818) 560-1000

Daytime Phone #