

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 842255

1. Entity Name

MCDONALD'S CORPORATION

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90083 036 \*\*\*150.00

Principal Place of Business

P.O. BOX 66351  
AMF O'HARE AIRPORT  
CHICAGO IL 60666

Mailing Address

P.O. BOX 66351  
AMF O'HARE AIRPORT  
CHICAGO IL 60666

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **36-2361282**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST  
STE 105  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

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 re-statuting)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE P  
NAME GREENBERG, JACK M  
STREET ADDRESS ONE MCDONALDS PLAZA  
CITY-ST-ZIP OAK BROOK, IL 0 60523 ☐ Delete

TITLE VT  
NAME PEARL, CARLETON D.  
STREET ADDRESS ONE MCDONALDS PLAZA  
CITY-ST-ZIP OAK BROOK, IL 0 60523 ☐ Delete

TITLE V  
NAME COHEN, BURTON. D.  
STREET ADDRESS ONE MCDONALD'S PLAZA  
CITY-ST-ZIP OAK BROOK, IL 0 60523 ☒ Delete

TITLE V  
NAME PAULL, MATTHEW H.  
STREET ADDRESS ONE MCDONALDS PLAZA  
CITY-ST-ZIP OAK BROOK, IL 0 60523 ☐ Delete

TITLE VS  
NAME SANTONA, GLORIA  
STREET ADDRESS ONE MCDONALD'S PLAZA  
CITY-ST-ZIP OAK BROOK IL 60523 ☐ Delete

TITLE C  
NAME TURNER, FRED L  
STREET ADDRESS ONE MCDONALD'S PLAZA  
CITY-ST-ZIP OAK BROOK IL 60523 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE v  
NAME Gerald F. Calabrese  
STREET ADDRESS ONE MCDONALD'S PLAZA  
CITY-ST-ZIP OAK BROOK IL 60523 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

*[Signature]*

/ASST. SECRETARY

4/24/01

630 623-3295

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)