

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842255

FILED
Jan 05, 2006
Secretary of State

Entity Name: MCDONALD'S CORPORATION

Current Principal Place of Business:

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

New Principal Place of Business:

ONE MCDONALD'S PLZ
OAK BROOK, IL 60523 US

Current Mailing Address:

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

New Mailing Address:

FEI Number: 36-2361282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: SKINER, JAMES
Address: ONE MCDONALD'S PLZ
City-St-Zip: OAK BROOK, IL 60523

Title: P () Delete
Name: ROBERTS, MICHAEL
Address: ONE MCDONALD'S DR
City-St-Zip: OAK BROOK, IL 66523

Title: V () Delete
Name: CALABRESE, GERALD F
Address: ONE MCDONALD'S PLAZA
City-St-Zip: OAK BROOK, IL 60523

Title: V () Delete
Name: PAULL, MATTHEW H.
Address: ONE MCDONALD'S PLAZA
City-St-Zip: OAK BROOK, IL 60523

Title: S () Delete
Name: SANTONA, GLORIA
Address: ONE MCDONALD'S PLAZA
City-St-Zip: OAK BROOK, IL 60523

Title: AS () Delete
Name: MILLER, MARCY
Address: ONE MCDONALD'S PLZ
City-St-Zip: OAK BROOK, IL 60523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: PAULL, MATTHEW H.
Address: ONE MCDONALD'S PLAZA
City-St-Zip: OAK BROOK, IL 60523

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCY MILLER

AS

01/05/2006

Electronic Signature of Signing Officer or Director

Date