

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000316

**FILED**  
**Mar 17, 2017**  
**Secretary of State**  
**CC1764583548**

**Entity Name:** SEAWORLD PARKS & ENTERTAINMENT, INC.

**Current Principal Place of Business:**

9205 SOUTHPARK CENTER LOOP  
SUITE 400  
ORLANDO, FL 32819

**Current Mailing Address:**

9205 SOUTHPARK CENTER LOOP  
SUITE 400  
ORLANDO, FL 32819 US

**FEI Number:** 27-1220404

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
SUITE #250  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title DIRECTOR  
Name D'ALESSANDRO, DAVID F.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name BENSION, RONALD  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name ROBINSON, DONALD C  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name WALLACE, PETER F.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name MCHALE, JUDITH A.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name THOMAS, DEBORAH  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR, CEO AND PRESIDENT  
Name MANBY, JOEL K.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title CHIEF LEGAL OFFICER, GENERAL  
COUNSEL AND CORPORATE  
SECRETARY  
Name TAYLOR, G. ANTHONY  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** PAUL B. POWERS

**ASSISTANT SECRETARY** 03/17/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title CHIEF ACCOUNTING OFFICER  
Name SWANSON, MARC G.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title ASSISTANT SECRETARY  
Name POWERS, PAUL B.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name TAUSCHER, ELLEN O.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name MOLONEY, THOMAS E.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title CHIEF FINANCIAL OFFICE AND  
TREASURER  
Name CRAGE, PETER J.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title ASSISTANT SECRETARY  
Name CLARK, CARLOS C.  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name GRAY, WILLIAM  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819

Title ASSISTANT TREASURER  
Name LOPEZ, DANIEL  
Address 9205 SOUTHPARK CENTER LOOP  
SUITE 400  
City-State-Zip: ORLANDO FL 32819