

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003062

Entity Name: ISLE OF CAPRI CASINOS, INC.

Current Principal Place of Business:

600 EMERSON RD.
SUITE 300
ST. LOUIS, MO 63141

Current Mailing Address:

600 EMERSON RD.
SUITE 300
ST. LOUIS, MO 63141 US

FEI Number: 41-1659606

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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	P/CEO/D
Name	MCDOWELL, VIRGINIA M
Address	600 EMERSON RD. SUITE 300
City-State-Zip:	ST. LOUIS MO 63141
Title	CLO
Name	QUATMANN, EDMUND LJR
Address	600 EMERSON ROAD, SUITE 300
City-State-Zip:	ST. LOUIS MO 63141

Title	COO
Name	BLOCK, ARNOLD L
Address	600 EMERSON ROAD, SUITE 300
City-State-Zip:	ST. LOUIS MO 63141
Title	CFO
Name	HAUSLER, ERIC L
Address	600 EMERSON ROAD
City-State-Zip:	ST. LOUIS MO 63141

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: EDMUND L. QUATMANN, JR.

CHIEF LEGAL OFFICER

01/27/2015

Electronic Signature of Signing Officer/Director Detail

Date