

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 16, 2009  
Secretary of State**

DOCUMENT# 851518

Entity Name: GOLDEN ARCH, INC.

**Current Principal Place of Business:**

ONE MCDONALD'S PLZ  
OAK BROOK, IL 60523

**New Principal Place of Business:**

**Current Mailing Address:**

AMF O'HARE AIRPORT  
P.O. BOX 66351  
CHICAGO, IL 606660351

**New Mailing Address:**

FEI Number: 36-3076472      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

**OFFICERS AND DIRECTORS:**

Title: AS ( ) Delete  
Name: MILLER, MARCY  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

Title: P ( ) Delete  
Name: KING, KAREN  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

Title: VS ( ) Delete  
Name: KOTEL, KATHERINE  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

Title: V ( ) Delete  
Name: LONG, LARRY  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

Title: VAS ( ) Delete  
Name: MATUSINEC, KAREN  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

Title: VPT ( ) Delete  
Name: KRAVCIK, KEITH E  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P (X) Change ( ) Addition  
Name: THOMPSON, DONALD  
Address: ONE MCDONALDS PLAZA  
City-St-Zip: OAK BROOK, IL 60523

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

I hereby certify that the information supplied with this filing does not qualify 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

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date