2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

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Entity Name: FOUR SEASONS HOTELS LIMITED CORPORATION

Current Principal Place of Business:

1165 LESLIE ST
TORONTO, ON M3C 2K8 CA

New Principal Place of Business:

1165 LESLIE ST
TORONTO, NA CA

Current Mailing Address:

1165 LESLIE ST
TORONTO, ON M3C 2K8 CA

New Mailing Address:

1165 LESLIE ST
TORONTO, NA CA

FEI Number: 94-2633101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D
Name: TAYLOR, KATHLEEN
Address: 1165 LESLIE ST TORONTO ON M3C -2K8 CA
City-St-Zip: TORONTO, NA CA

Title: P
Name: TAYLOR, KATHLEEN
Address: 1165 LESLIE ST TORONTO ON M3C -2K8 CA
City-St-Zip: TORONTO, NA CA

Title: CFO
Name: DAVISON, JOHN
Address: 1165 LESLIE ST TORONTO ON M3C -2K8 CA
City-St-Zip: TORONTO, NA CA

Title: S
Name: COHEN, SARAH
Address: 1165 LESLIE ST TORONTO ON M3C -2K8 CA
City-St-Zip: TORONTO, NA CA

Title: V
Name: VANDERJAGT, LAUREL
Address: 1165 LESLIE ST TORONTO ON M3C -2K8 CA
City-St-Zip: TORONTO, NA CA

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: SARAH COHEN S 04/27/2012

Electronic Signature of Signing Officer or Director Date