

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
MAGICAL CRUISE COMPANY, LIMITED**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RA/chg
@ 9/26/12

Electronic Filing Menu

Corporate Filing Menu

Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of England in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Magical Cruise Company, Limited
2. The principal office address: 3 Queen Caroline Street
Hammersmith, London W69PE, England
3. The mailing address (if different): 500 S. Buena Vista Street
Burbank, CA 91521
4. Date of incorporation/qualification: 10/29/1996 Document number: F96000005618
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jeffrey H. Smith
1375 Buena Vista Drive, 4th Floor North
Lake Buena Vista, FL 32830

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Jeffrey S. Craigmile
1375 Buena Vista Drive, 4th Floor North
Lake Buena Vista, FL 32830

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

James A. Stockton Director
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

9/24/12
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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