F98000 Requester's Name	0005192
The OACT Disnep Comp Diane Austin M/C 0586 – 80/357 500 South Buena Vista Street Burbank, California 91521	
	Office Use Only
CORPORATION NAME(S) & DOCUM	<b>300004689123</b> 7 -11/20/0101038023 *****35.00
1 (Corporation Name)	= (Document #) -
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(Corporation Name)	(Document #)
3 (Corporation Name)	(Document #)
4 (Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
<ul> <li>Profit</li> <li>Not for Profit</li> <li>Limited Liability</li> <li>Domestication</li> <li>Other</li> </ul>	<ul> <li>Amendment</li> <li>Resignation of R.A., Officer/Director</li> <li>Change of Registered Agent</li> <li>Dissolution/Withdrawal</li> <li>Merger</li> </ul>
OTHER FILINGS	
<ul> <li>Annual Report</li> <li>Fictitious Name</li> </ul>	REGISTRATION/QUALIFICATION         Foreign         Limited Partnership         Reinstatement         Trademark         Other
CR2E031(7/97)	Examiner's Initials $(\mathcal{Q})$

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## 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, the undersigned corporation organized under the laws of the State of <u>Delaware</u> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : \_\_\_\_\_\_ Disney Regional Entertainment, Inc.

- 2. The mailing address of the corporation : 500 South Buena Vista Street. Burbank, CA 91521-0586
- 3. Date of incorporation/qualification: 09/16/98 Document number: F98000005192

4. The name and address of the current registered agent and office:

Frank S. Ioppolo

1375 Buena Vista Drive, 4th Floor North

Lake Buena Vista, FL 32830

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

(P. O. Box Not Acceptable)

Jeffrey H. Smith

1375 Buena Vista Drive, 4th Floor North

Lake Buena Vista, FL 32830 🗍

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.

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(Signature of an officer, chairman or vice chairman of the board)	(Date)

Marsha L. Reed, Secretary (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I 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.

- Cha	w the		11/15/01	10 VIa
]]	(Signature of Registered Agent)		(Date)	NO
If signing on b	ehalf of an entity:			W 20
<u> </u>	(Typed or Printed Name)		(Capacity)	- AN RY OF
	* * *	FILING FEE: \$35.00	)*** —	ORATI 9: 1
CR2E045(9/00)	Division of Corporations	P.O. Box 6327	TALLAHASSEE, FL 32314	I ONS