

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122628

Entity Name: WALT DISNEY TRAVEL CO., INC.

Current Principal Place of Business:

190 CENTER STREET PROMENADE
ANAHEIM, CA 92805

Current Mailing Address:

500 S BUENA VISTA STREET
BURBANK, CA 91521

FEI Number: 95-2553603

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAIGMILE, JEFFREY S
1375 BUENA VISTA DR
4TH FLOOR NORTH
LAKE BUENA VISTA, FL 32830 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 ASST TREASURER
Name SOLOMON, AARON H
Address 1170 CELEBRATION BOULEVARD
City-State-Zip: CELEBRATION FL 34747

Title ASST TREASURER
Name PRIEST, HENRY C
Address 1170 CELEBRATION BOULEVARD
City-State-Zip: CELEBRATION FL 34747

Title SENIOR VICE PRESIDENT
Name CRAIGMILE, JEFFREY S
Address 1375 EAST BUENA VISTA DRIVE
City-State-Zip: LAKE BUENA VISTA FL 32830

Title TREASURER
Name STOWELL, JOHN A
Address 500 S BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

Title PRESIDENT
Name SVENDSEN, KENNETH
Address 220 CELEBRATION PLACE
City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT, ASST SECRETARY
Name SCHMUDDE, LEE
Address 1375 EAST BUENA VISTA DRIVE
City-State-Zip: LAKE BUENA VISTA FL 32830

Title SECRETARY, DIRECTOR
Name REED, MARSHA L
Address 500 S BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

Title DIRECTOR
Name MCGINNIS, MATTHEW L
Address 500 S BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

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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: MARSHA L REED

SECRETARY

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST TREASURER
Name SALAMA, MICHAEL
Address 500 S BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

Title DIRECTOR
Name STAGGS, THOMAS O
Address 500 S BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521