

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122628

FILED
Apr 18, 2007
Secretary of State

Entity Name: WALT DISNEY TRAVEL CO., INC.

Current Principal Place of Business:

190 CENTER STREET PROMENADE
SUITE 1955
ANAHEIM, CA 92805

New Principal Place of Business:

Current Mailing Address:

190 CENTER STREET PROMENADE
SUITE 1955
ANAHEIM, CA 92805

New Mailing Address:

FEI Number: 95-2553603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Change (X) Addition
Name: REED, MARSHA L
Address: 500 S. BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: T () Change (X) Addition
Name: BUETTNER, ANNE L
Address: 500 S. BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: D () Change (X) Addition
Name: RASULO, JAMES A
Address: 500 S. BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: P () Change (X) Addition
Name: GARFIELD, RANDY A
Address: 3020 MAINGATE LANE, STE 2802
City-St-Zip: KISSIMMEE, FL 34747

Title: AT () Change (X) Addition
Name: HANFORD, JAMES D
Address: 500 S. BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

Title: VD () Change (X) Addition
Name: THOMPSON, DAVID K
Address: 500 S. BUENA VISTA STREET
City-St-Zip: BURBANK, CA 91521

I hereby certify that the information supplied with this filing does not qualify for the 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: MARSHA L. REED

S

04/18/2007

Electronic Signature of Signing Officer or Director

_____ Date