2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005826

Entity Name: DISNEY'S POLYNESIAN VILLAS & BUNGALOWS

CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

Current Mailing Address:

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

FEI Number: 47-1160116 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAIGMILE, JEFFREY S 1375 BUENA VISTA DRIVE SUITE 4N 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 DIRECTOR & PRESIDENT

Name POTROCK, KENNETH M

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

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Title DIRECTOR

Name NIEMAN, LEIGH ANNE

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR, VICE PRESIDENT &

ASSISTANT SECRETARY

Name DEESE-BYRNES, SONYA

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR & VICE PRESIDENT

Name SAKASKE, SHANNON

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR, VICE PRESIDENT &

FILED Apr 28, 2015

Secretary of State

CC7381359127

SECRETARY

Name CHANG, YVONNE

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT & TREASURER

Name SCHULTZ, TERRI A

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT & ASSISTANT

TREASURER

Name PAULSEN, BRIAN

Address 1390 CELEBRATION BOULEVARD

City-State-Zip: CELEBRATION FL 34747

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: YVONNE CHANG DIRECTOR 04/28/2015