

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122628

Entity Name: WALT DISNEY TRAVEL CO., INC.**Current Principal Place of Business:**190 CENTER STREET PROMENADE
SUITE 1955
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:**GIACALONE, MARGARET C
1375 EAST BUENA VISTA DRIVE,
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. SECRETARY
Name	SOLOMON, AARON H
Address	1170 CELEBRATION BOULEVARD
City-State-Zip:	CELEBRATION FL 34747

Title	TREASURER
Name	HEADLEY, JONATHAN S
Address	500 S BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521

Title	PRESIDENT
Name	BILBY, CLAIRE L
Address	1390 CELEBRATION BLVD
City-State-Zip:	CELEBRATION FL 34747

Title	SECRETARY, DIRECTOR
Name	GAVAZZI, CHAKIRA H
Address	500 S BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521

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

Title	VP
Name	ALMAGUER, CARLOS L
Address	190 CENTER STREET PROMENADE SUITE 1955
City-State-Zip:	ANAHEIM CA 92805

Title	ASST. TREASURER
Name	BELZER, GREGORY
Address	500 S BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521

Title	SENIOR VICE PRESIDENT
Name	STOWELL, JOHN A
Address	611 NORTH BRAND BLVD
City-State-Zip:	GLENDALE CA 91203

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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: CHAKIRA H GAVAZZI**SECRETARY****05/05/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP
Name CLARK, LYNN B
Address 190 CENTER STREET PROMENADE
SUITE 1955
City-State-Zip: ANAHEIM CA 92805

Title ASST. SECRETARY
Name JUSTICE, SCOTT A
Address 1375 E BUENA VISTA ST
City-State-Zip: LAKE BUENA VISTA FL 32830

Title SENIOR VICE PRESIDENT
Name GIACALONE, MARGARET C
Address 1375 E BUENA VISTA DRIVE
4TH FLOOR NORTH
City-State-Zip: LAKE BUENA VISTA FL 32830

Title ASST. SECRETARY
Name STEED, SHANNA L
Address 500 S BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521