

2014 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:**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	SECRETARY, DIRECTOR
Name	REED, MARSHA L
Address	500 S. BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521

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

Title	PRESIDENT
Name	GARFIELD, RANDY A
Address	220 CELEBRATION PLACE
City-State-Zip:	CELEBRATION FL 34747

Title	ASST. SECRETARY, VP
Name	SCHMUDDLE, LEE
Address	1375 E BUENA VISTA DRIVE
City-State-Zip:	LAKE BUENA VISTA FL 32830

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

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

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****04/30/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date