

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000071529

**FILED**  
**Mar 11, 2013**  
**Secretary of State**  
**CC9505979769**

**Entity Name:** WALT DISNEY PARKS AND RESORTS U.S., INC.

**Current Principal Place of Business:**

1375 BUENA VISTA DRIVE  
4TH FLOOR NORTH  
LAKE BUENA VISTA, FL 32830

**Current Mailing Address:**

500 SOUTH BUENA VISTA STREET  
BURBANK, CA 91521-0105 US

**FEI Number:** 95-2412883

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CRIAGMILE, JEFFREY S  
1375 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 VP, SECRETARY  
Name REED, MARSHA L  
Address 500 SOUTH BUENA VISTA STREET  
City-State-Zip: BURBANK CA 91521

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

Title VP, ASST. SECRETARY  
Name GIACALONE, MARGARET C  
Address 1375 BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title MANAGING VP  
Name ONTKO, DAVID A  
Address 700 W BALL ROAD  
City-State-Zip: ANAHEIM CA 92802

Title VP  
Name SCHMUDDE, LEE  
Address 1375 BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

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

Title PRESIDENT  
Name CROFTON, MEG  
Address 1375 BUENA VISTA DRIVE  
4TH FLOOR NORTH  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title SENIOR VP, CFO  
Name CONNELLY, ANTHONY J  
Address 1375 BUENA VISTA DRIVE  
4TH FLOOR NORTH  
City-State-Zip: LAKE BUENA VISTA FL 32830

**Continues on page 2**

*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

**VP AND SECRETARY**

**03/11/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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