

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S80694

**Entity Name:** THE CELEBRATION COMPANY**Current Principal Place of Business:**700 CELEBRATION AVE  
CELEBRATION, FL 34747**Current Mailing Address:**500 SOUTH BUENA VISTA STREET  
BURBANK, CA 91521-0105 US**FEI Number:** 59-3125104**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIACALONE, MARGARET C  
1375 EAST BUENA VISTA DR  
4TH FLOOR NORTH  
LAKE BUENA VISTA, FL 32380 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            PRESIDENT  
Name            HOPKINS, ANDREW M  
Address        700 CELEBRATION AVE  
City-State-Zip: CELEBRATION FL 34747

Title            DIRECTOR  
Name            SMITH, JEFFREY H  
Address        500 SOUTH BUENA VISTA STREET  
City-State-Zip: BURBANK CA 91521

Title            SECRETARY, DIRECTOR  
Name            REED, MARSHA L  
Address        500 SOUTH BUENA VISTA STREET  
City-State-Zip: BURBANK CA 91521

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

Title            ASST. SECRETARY  
Name            BOWERS, JOYCE M  
Address        1375 E BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title            VP  
Name            PIERCE, PAGE P  
Address        215 CELEBRATION PLACE  
City-State-Zip: CELEBRATION FL 34747

Title            ASST. SECRETARY  
Name            JONES, CHRISTOPHER A  
Address        1375 E BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title            ASST. SECRETARY  
Name            SALAMA, MICHAEL  
Address        500 SOUTH BUENA VISTA STREET  
City-State-Zip: BURBANK CA 91521-0105

**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**SECRETARY****04/23/2019**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

|                 |                              |
|-----------------|------------------------------|
| Title           | ASST. TREASURER              |
| Name            | BELZER, GREGORY              |
| Address         | 500 SOUTH BUENA VISTA STREET |
| City-State-Zip: | BURBANK CA 91521-0105        |