

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S80694

Entity Name: THE CELEBRATION COMPANY**Current Principal Place of Business:**700 CELEBRATION AVENUE
SUITE 200
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:**CRAIGMILE, JEFFREY S
1375 BUENA VISTA DRIVE
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	Title	DIRECTOR
Name	MCGUIRE, DOUGLAS S	Name	SMITH, JEFFREY H
Address	500 S BUENA VISTA ST	Address	500 SOUTH BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521	City-State-Zip:	BURBANK CA 91521
Title	SECRETARY, DIRECTOR	Title	TREASURER
Name	REED, MARSHA L	Name	BUETTNER, ANNE L
Address	500 SOUTH BUENA VISTA STREET	Address	500 SOUTH BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521	City-State-Zip:	BURBANK CA 91521
Title	ASST. SECRETARY	Title	VP
Name	BOWERS, JOYCE M	Name	PIERCE, PAGE P
Address	1375 BUENA VISTA DRIVE	Address	215 CELEBRATION PLACE
City-State-Zip:	LAKE BUENA VISTA FL 32830	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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARSHA L. REED**SECRETARY****03/11/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date