

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001204

Entity Name: DISNEY PARKS, EXPERIENCES AND PRODUCTS, INC.**Current Principal Place of Business:**500 SOUTH BUENA VISTA STREET
BURBANK, CA 91521**Current Mailing Address:**500 SOUTH BUENA VISTA STREET
BURBANK, CA 91521**FEI Number:** 26-3381284**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	TREASURER
Name	GOMEZ, CARLOS A
Address	500 SOUTH BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521

Title	DIRECTOR, CHAIRMAN
Name	D'AMARO, JOSHUA
Address	500 SOUTH BUENA VISTA STREET
City-State-Zip:	BURBANK CA 91521

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

Title	DIRECTOR
Name	GIACALONE, MARGARET C
Address	1375 E BUENA VISTA DRIVE 4TH FLOOR NORTH
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: CHAKIRA H GAVAZZI**SECRETARY****04/26/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date