

**2018 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F14000004763

**Entity Name:** DISNEY GIFT CARD SERVICES, INC.**Current Principal Place of Business:**1675 BUENA VISTA DR  
LAKE BUENA VISTA, FL 32830**Current Mailing Address:**500 S. BUENA VISTA ST  
BURBANK, CA 91521**FEI Number:** 20-1355576**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIACALONE, MARGARET C  
1375 BUENA VISTA DR  
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:** MARGARET C GIACALONE

05/25/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title ASST. SECRETARY  
Name SOLOMON, AARON H  
Address 1170 CELEBRATION BLVD  
City-State-Zip: CELEBRATION FL 34747

Title VP  
Name CASTRO, CARLOS D  
Address 1675 BUENA VISTA DR  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title ASST. TREASURER  
Name BELZER, GREGORY  
Address 500 S. BUENA VISTA ST  
City-State-Zip: BURBANK CA 91521

Title DIRECTOR, PRESIDENT  
Name KAPENSTEIN, JAMES M  
Address 500 S. BUENA VISTA ST  
City-State-Zip: BURBANK CA 91521

Title VP  
Name STOWELL, JOHN A  
Address 611 NORTH BRAND BLVD  
City-State-Zip: GLENDALE CA 91203

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

Title VP  
Name GIACALONE, MARGARET C  
Address 1375 EAST BUENA VISTA DRIVE  
4TH FLOOR NORTH  
City-State-Zip: LAKE BUENA VISTA FL 32830

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

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*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**

05/25/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

Title ASST. SECRETARY  
Name STEED, SHANNA L  
Address 500 S. BUENA VISTA ST  
City-State-Zip: BURBANK CA 91521

Title ASST. SECRETARY  
Name DAVISON, PETER T  
Address 500 S. BUENA VISTA ST  
City-State-Zip: BURBANK CA 91521