

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14122

Entity Name: BUENA VISTA HOME ENTERTAINMENT, INC.**Current Principal Place of Business:**500 S BUENA VISTA ST
BURBANK, CA 91521-0105**Current Mailing Address:**500 S BUENA VISTA ST
BURBANK, CA 91521-0105**FEI Number:** 95-4090650**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRAIGMILE, JEFFREY S
1375 BUENA VISTA DR
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 EVP
Name MACPHERSON, LORI J
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521Title SD
Name REED, MARSHA L
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521Title T
Name BUETTNER, ANNE L
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521Title D
Name MCGINNIS, MATTHEW L
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521Title AT
Name HANFORD, JAMES D
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

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****02/28/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date