

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37433

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** DISNEY CONSUMER PRODUCTS, INC.

**Current Principal Place of Business:**

500 S BUENA VISTA ST  
BURBANK, CA 91521 US

**New Principal Place of Business:**

**Current Mailing Address:**

500 S. BUENA VISTA ST.  
BURBANK, CA 915210105 US

**New Mailing Address:**

**FEI Number:** 95-4073590

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, JEFFREY H  
1375 BUENA VISTA DRIVE  
4TH FLOOR NORTH  
LAKE BUENA VISTA, FL 32380 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOONEY, ANDREW P  
Address: 500 S BUENA VISTA ST  
City-St-Zip: BURBANK, CA 91521

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

Title: VD  
Name: THOMPSON, DAVID K  
Address: 500 S. BUENA VISTA ST.  
City-St-Zip: BURBANK, CA 91521

Title: T  
Name: BUETTNER, ANNE L  
Address: 500 S. BUENA VISTA ST.  
City-St-Zip: BURBANK, CA 91521

Title: AT  
Name: HANFORD, JAMES D  
Address: 500 S. BUENA VISTA ST.  
City-St-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

SD

04/26/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date