## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000186441

Entity Name: DISNEY VACATIONS, LLC

## **Current Principal Place of Business:**

1375 BUENA VISTA DR 4TH FLOOR N LAKE BUENA VISTA, FL 32830

**Current Mailing Address:** 

500 S BUENA VISTA ST BURBANK, CA 91521-0105 US

**FEI Number: NOT APPLICABLE** 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.

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SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Apr 23, 2019

**Secretary of State** 

6208885602CC

Authorized Person(s) Detail:

Title **AUTHORIZED MEMBER** Title

THE CELEBRATION COMPANY Name SISKIE, SHARON Name

700 CELEBRATION AVE Address 220 CELEBRATION PLACE Address City-State-Zip: CELEBRATION FL 34747 CELEBRATION FL 31747 City-State-Zip:

Title **TREASURER** Title **SECRETARY** 

Name HEADLEY, JONATHAN S REED, MARSHA L Name Address 500 S BUENA VISTA ST Address 500 S BUENA VISTA ST BURBANK CA 91521-0105 City-State-Zip: BURBANK CA 91521-0105 City-State-Zip:

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARSHA L REED **SECRETARY** 

04/23/2019 Date