

2016 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M00000000888

Entity Name: DISNEY BUSINESS PRODUCTIONS, LLC

Current Principal Place of Business:

1375 BUENA VISTA DRIVE
LAKE BUENA VISTA, FL 32830

Current Mailing Address:

500 SOUTH BUENA VISTA STREET
BURBANK, CA 91521 US

FEI Number: 59-3635177

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAIGMILE, JEFFREY S
1375 BUENA VISTA DRIVE
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

Authorized Person(s) Detail :

Title ASST TREASURER
Name SOLOMON, AARON H
Address 1170 CELEBRATION BOULEVARD
City-State-Zip: CELEBRATION FL 34747

Title ASST TREASURER
Name PRIEST, HENRY C
Address 1170 CELEBRATION BOULEVARD
City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT
Name JEFFREY, JAMES P
Address 215 CELEBRATION PLACE
City-State-Zip: CELEBRATION FL 34747

Title TREASURER
Name STOWELL, JOHN A
Address 500 SOUTH BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

Title VICE PRESIDENT, ASST SECRETARY
Name SCHMUDDE, LEE
Address 1375 BUENA VISTA DRIVE
City-State-Zip: LAKE BUENA VISTA FL 32830

Title VICE PRESIDENT, SECRETARY
Name REED, MARSHA L
Address 500 SOUTH BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

Title ASST TREASURER
Name SALAMA, MICHAEL
Address 500 SOUTH BUENA VISTA STREET
City-State-Zip: BURBANK CA 91521

Title SOLE MEMBER
Name THE CELEBRATION COMPANY
Address 1375 BUENA VISTA DRIVE
City-State-Zip: LAKE BUENA VISTA FL 32830

Continues on page 2

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

09/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	VP
Name	SMITH, MARYANN
Address	200 CELEBRATION PLACE
City-State-Zip:	CELEBRATION FL 34747