

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000222

FILED
Feb 11, 2009
Secretary of State

Entity Name: SESAC, INC.

Current Principal Place of Business:

420 LINCOLN ROAD
SUITE 502
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

55 MUSIC SQUARE EAST
NASHVILLE, TN 37203

New Mailing Address:

FEI Number: 13-1325220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL REGISTERED AGENTS, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: VCFO () Delete
Name: SCHLUMPF, WARREN L
Address: 152 WEST 57TH STREET - 57TH FLOOR
City-St-Zip: NEW YORK, NY 100193310

Title: CCEO () Delete
Name: SWID, STEPHEN C
Address: 152 WEST 57TH STREET - 57TH FLOOR
City-St-Zip: NEW YORK, NY 100193310

Title: PCOO () Delete
Name: COLLINS, PATRICK T
Address: 55 MUSIC SQUARE EAST
City-St-Zip: NASHVILLE, TN 37203

Title: TD () Delete
Name: SHUMAN, STANLEY S
Address: 711 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: JOSEPHSON, JOHN H
Address: 711 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: GERSHON, FREDRIC B
Address: 421 WEST 54TH STREET
City-St-Zip: NEW YORK, NY 100194450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WARREN SCHLUMPF

VCFO

02/11/2009

Electronic Signature of Signing Officer or Director

_____ Date