

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000222

FILED
Jan 25, 2011
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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: VCFO
Name: SCHLUMPF, WARREN L
Address: 152 WEST 57TH STREET - 57TH FLOOR
City-St-Zip: NEW YORK, NY 100193310

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

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

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

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

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

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: DOUGLAS ANDERSON

MR.

01/25/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date