

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007260

Entity Name: DDI SALES CORP.

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

1220 SIMON CIRCLE
ATTN: LEGAL DEPT.
ANAHEIM, CA 92806 US

New Principal Place of Business:

Current Mailing Address:

1220 SIMON CIRCLE
ATTN: LEGAL DEPT.
ANAHEIM, CA 92806 US

New Mailing Address:

1220 SIMON CIRCLE
ATTN: SUSAN HAWKS
ANAHEIM, CA 92806 US

FEI Number: 33-0936715

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 323012525 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: DP () Delete
Name: WILLIAMS, MIKEL
Address: 1220 SIMON CIRCLE
City-St-Zip: ANAHEIM, CA 92806

Title: DVS () Delete
Name: SCHEUERMAN, KURT
Address: 1220 SIMON CIRCLE
City-St-Zip: ANAHEIM, CA 92806

Title: ATS () Delete
Name: SELANDER, BRIAN
Address: 1220 SIMON CIRCLE
City-St-Zip: ANAHEIM, CA 92806

Title: VTCF () Delete
Name: GOFF, SULLY L
Address: 1220 SIMON CIR
City-St-Zip: ANAHEIM, CA 92806

Title: SVP () Delete
Name: BARNES, GERALD P
Address: 1220 SIMON CIR
City-St-Zip: ANAHEIM, CA 92806

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: VTCF (X) Change () Addition
Name: EDWARDS, SULLY L
Address: 1220 SIMON CIR
City-St-Zip: ANAHEIM, CA 92806

Title: SVP (X) Change () Addition
Name: BARNES, GERALD P
Address: 1220 SIMON CIR
City-St-Zip: ANAHEIM, CA 92806

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: KURT SCHEUERMAN

DVS

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date