2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006279

Entity Name: NETFLIX, INC.

FILED Mar 16, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 970 UNIVERSITY AVENUE LOS GATOS, CA 95032 **Current Mailing Address: New Mailing Address:** 970 UNIVERSITY AVENUE 970 UNIVERSITY AVENUE LOS GATOS, CA 95032 ATTN: LEGAL DEPT. LOS GATOS, CA 95032 FEI Number: 77-0467272 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 526 E. PARK AVENUE TALLAHASSEE, FL 32301 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPCF () Delete () Change () Addition Name: HASTINGS, REED Name: 970 UNIVERSITY AVENUE Address: Address: City-St-Zip: LOS GATOS, CA 95032 City-St-Zip: SCFO Title: Title: () Delete () Change () Addition Name: MCCARTHY, W. BARRY JR. Name: 970 UNIVERSITY AVENUE Address: Address: LOS GATOS, CA 95032 City-St-Zip: City-St-Zip:

Title: Name: Address: City-St-Zip: Title:

Name:

Address:

DILLON, THOMAS R 970 UNIVERSITY AVENUE LOS GATOS, CA 95032 () Delete KILGORE, LESLIE J

970 UNIVERSITY AVENUE

LOS GATOS, CA 95032

() Delete

City-St-Zip: Title: () Delete BARTON, RICHARD N Name: 13810 SE EASTGATE WAY, SUITE 400

Address: City-St-Zip: BELLEVUE, WA 98008

Title: () Delete HOAG, JAY C Name: 528 RAMONA STREET Address: City-St-Zip: PALO ALTO, CA 94301 Title: () Change () Addition

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

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

Name: Address: City-St-Zip:

Title: () Change () Addition Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Name:

Address:

Address: City-St-Zip:

Address:

SIGNATURE: BARRY MCCARTHY **SCFO** 03/16/2004 MICHAEL N. SCHUH, DIRECTOR 70 WILLOW ROAD, SUITE 200 MENLO PARK, CA 94025

MICHAEL RAMSAY, DIRECTOR 2160 GOLD STREET ALVISO, CA 95002

A. ROBERT PISANO, DIRECTOR 5757 WILSHIRE BLVD., 8TH FLOOR LOS ANGELES, CA 90036

TIMOTHY M. HALEY, DIRECTOR 3000 SAND HILL ROAD, BLDG. 2, SUITE 290 MENLO PARK, CA 94025