2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023037

Entity Name: CORSICA PRODUCTIONS, INC.

FILED Apr 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10202 WEST WASHINGTON BLVD. CULVER CITY, CA 90232 **Current Mailing Address: New Mailing Address:** 10202 WEST WASHINGTON BLVD. SONY PICTURES PLAZA #1132 CULVER CITY, CA 90232 FEI Number: 95-4787604 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 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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: () Delete () Change () Addition MOSKO, STEVE Name: Name: 10202 W. WASHINGTON BLVD. Address: Address: City-St-Zip: CULVER CITY, CA 90232 City-St-Zip: **EVCF** Title: Title: () Delete () Change () Addition Name: HENDLER, DAVID C Name: 10202 W WASHINGTON BLVD Address: Address: CULVER CITY, CA 90232 City-St-Zip: City-St-Zip: Title: Title: FVP () Delete () Change () Addition BOONE, GREGORY K Name: Name: 10202 W WASHINGTON BLVD Address: Address: CULVER CITY, CA 90232 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition GOFMAN, STEVEN Name: Name: Address: 10202 W WASHINGTON BLVD Address: City-St-Zip: CULVER CITY, CA 90232 City-St-Zip: Title: **EVAS** Title: () Delete () Change () Addition BERG, CORII D Name: Name: 10202 W. WASHINGTON BLVD. Address: Address: City-St-Zip: CULVER CITY, CA 90232 City-St-Zip: () Delete Title: **EVPS** Title: () Change () Addition Name: WEIL, LEAH Name: 10202 W. WASHINGTON BLVD. Address: Address: City-St-Zip: City-St-Zip: CULVER CITY, CA 90232

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: STEVEN GOFMAN AS 04/09/2009