

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32338

FILED
Jul 06, 2007
Secretary of State

Entity Name: OPERATION CALIFORNIA, INC.

Current Principal Place of Business:

3617 HAYDEN AVE.
CULVER CITY, CA 90232

New Principal Place of Business:

Current Mailing Address:

3617 HAYDEN AVE.
CULVER CITY, CA 90232

New Mailing Address:

FEI Number: 95-3504080 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARRY, BETTY LOU
17627 FOXBOROUGH LANE
BOCA RATON, FL 33486 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LARSEN, GARY,
Address: 4004 COUNTRY CLUB DR.
City-St-Zip: LAKEWOOD, CA

Title: PD () Delete
Name: WALDEN, RICHARD,
Address: 927 BURNSIDE AVE.
City-St-Zip: LOS ANGELES, CA

Title: D () Delete
Name: ADAMS, TONY,
Address: 11777 SAN VICENTE BL. 520
City-St-Zip: LOS ANGELES, CA

Title: D () Delete
Name: EDWARDS, BLAKE,
Address: 11777 SAN VICENTE BLVD
City-St-Zip: LOS ANGELES, CA

Title: D () Delete
Name: EDWARDS, JULIE ANDRE, WS
Address: 11777 SAN VICENTE BLVD.
City-St-Zip: LOS ANGELES, CA

Title: CD () Delete
Name: JONATHAN ESTRIN,
Address: 938 12TH STREET #201
City-St-Zip: SANTA MONICA, CA 90403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: WALDEN, RICHARD,
Address: 927 BURNSIDE AVE.
City-St-Zip: LOS ANGELES, CA

Title: P (X) Change () Addition
Name: WALDEN, RICHARD M
Address: 927 BURNSIDE AVE
City-St-Zip: LOS ANGELES, CA 90036

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: RICHARD WALDEN

D

07/06/2007

Electronic Signature of Signing Officer or Director

_____ Date