

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32338

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** OPERATION CALIFORNIA, INC.

**Current Principal Place of Business:**

3617 HAYDEN AVE.  
A  
CULVER CITY, CA 90232

**New Principal Place of Business:**

**Current Mailing Address:**

3617 HAYDEN AVE.  
A  
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

**OFFICERS AND DIRECTORS:**

Title: V CH  
Name: LARSEN, GARY  
Address: 4004 COUNTRY CLUB DR.  
City-St-Zip: LAKEWOOD, CA

Title: P  
Name: WALDEN, RICHARD  
Address: 927 BURNSIDE AVE.  
City-St-Zip: LOS ANGELES, CA

Title: CD  
Name: MAHDESIAN, MICHAEL  
Address: 13075 BLAIRWOOD  
City-St-Zip: STUDIO CITY, CA 91606

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

Title: D  
Name: EDWARDS, JULIE ANDREWS  
Address: 11777 SAN VICENTE BLVD.  
City-St-Zip: LOS ANGELES, CA

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

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: RICHARD M. WALDEN

PRES

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date