

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000001210

**Entity Name:** EDUCATIONAL MEDIA FOUNDATION INCORPORATED**Current Principal Place of Business:**5700 WEST OAKS BLVD  
ROCKLIN, CA 95765**Current Mailing Address:**5700 WEST OAKS BLVD  
ROCKLIN, CA 95765**FEI Number:** 94-2816342**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 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

**Officer/Director Detail :**

Title PRES  
Name NOVAK, MIKE  
Address 5700 W OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title DIR  
Name FERRY, DAVID  
Address 5700 W OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title TREASURER  
Name ATKINSON, DAVID  
Address 5700 WEST OAKS BLVD.  
City-State-Zip: ROCKLIN CA 95765

Title CHAIRMAN  
Name CHAMBLISS, DARRELL  
Address 5700 W OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title CHIEF CREATIVE OFICER  
Name PIERCE, DAVID  
Address 5700 W OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title DIRECTOR  
Name GOLEMBESKI, WALT  
Address 5700 W OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title CHIEF OPERATIONS OFFICER  
Name MASON, ALAN  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title GENERAL COUNSEL/SECRETARY  
Name BLAIR, KEVIN  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

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*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MIKE NOVAK

PRESIDENT/CEO

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP HUMAN RESOURCES  
Name BURGER, BRIAN  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title ASSISTANT TREASURER  
Name MILLER, JOE  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title DIRECTOR  
Name BARNHART, MITCH  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title DIRECTOR  
Name ANTONELLI, DAN  
Address 5700 WEST OAKS BLVD.  
City-State-Zip: ROCKLIN CA 95765

Title CFO  
Name MOSER, ERIC  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title ASSISTANT SECRETARY  
Name WALKER, VIRGINIA  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765

Title DIRECTOR  
Name MOODY, LARRY  
Address 5700 WEST OAKS BLVD  
City-State-Zip: ROCKLIN CA 95765