



Secretary of State
Statement of Information
 (California Stock, Agricultural
 Cooperative and Foreign Corporations)

SI-550

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20-048400

FILED
 Secretary of State
 State of California
 NOV 20 2020

IMPORTANT — Read instructions before completing this form.

Fees (Filing plus Disclosure) – \$25.00;

Copy Fees – First page \$1.00; each attachment page \$0.50;
 Certification Fee - \$5.00 plus copy fees

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

Scott Ward Productions

This Space For Office Use Only

2. 7-Digit Secretary of State File Number

C0997154

3. Business Addresses

a. Street Address of Principal Executive Office - Do not list a P.O. Box 18401 Burbank Blvd., Suite 211	City (no abbreviations) Tarzana	State CA	Zip Code 91356
b. Mailing Address of Corporation, if different than Item 3a	City (no abbreviations)	State	Zip Code
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box	City (no abbreviations)	State CA	Zip Code

4. Officers

The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ Donovan	First Name	Middle Name	Last Name Scott	Suffix
Address 7025 Orion Ave.			City (no abbreviations) Van Nuys	State CA Zip Code 91406
b. Secretary Donovan	First Name	Middle Name	Last Name Scott	Suffix
Address 7025 Orion Ave.			City (no abbreviations) Van Nuys	State CA Zip Code 91406
c. Chief Financial Officer/ Donovan	First Name	Middle Name	Last Name Scott	Suffix
Address 7025 Orion Ave.			City (no abbreviations) Van Nuys	State CA Zip Code 91406

5. Director(s)

California Stock and Agricultural Cooperative Corporations ONLY: **Item 5a:** At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).

a. First Name Donovan	Middle Name	Last Name Scott	Suffix
Address 7025 Orion Ave.		City (no abbreviations) Van Nuys	State CA Zip Code 91406
b. Number of Vacancies on the Board of Directors, if any			

6. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) Harvey	Middle Name H.	Last Name Levy	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 18401 Burbank Blvd., Suite 211		City (no abbreviations) Tarzana	State CA Zip Code 91356

CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b

7. Type of Business

Describe the type of business or services of the Corporation
 Motion Picture Loan Out

8. The information contained herein, including in any attachments, is true and correct.

10/20/20
 Date

HARVEY H LEVY
 Type or Print Name of Person Completing the Form

ACCT
 Title

[Signature]
 Signature