



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

SI-550

60

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<br>18401 Burbank Blvd., Suite 211      | City (no abbreviations)<br>Tarzana | State<br>CA | Zip Code<br>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<br>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/<br>Donovan | First Name | Middle Name | Last Name<br>Scott                  | Suffix                        |
| Address<br>7025 Orion Ave.             |            |             | City (no abbreviations)<br>Van Nuys | State<br>CA Zip Code<br>91406 |
| b. Secretary<br>Donovan                | First Name | Middle Name | Last Name<br>Scott                  | Suffix                        |
| Address<br>7025 Orion Ave.             |            |             | City (no abbreviations)<br>Van Nuys | State<br>CA Zip Code<br>91406 |
| c. Chief Financial Officer/<br>Donovan | First Name | Middle Name | Last Name<br>Scott                  | Suffix                        |
| Address<br>7025 Orion Ave.             |            |             | City (no abbreviations)<br>Van Nuys | State<br>CA Zip Code<br>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<br>Donovan                                 | Middle Name | Last Name<br>Scott                  | Suffix                        |
| Address<br>7025 Orion Ave.                               |             | City (no abbreviations)<br>Van Nuys | State<br>CA Zip Code<br>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)<br>Harvey                                    | Middle Name<br>H. | Last Name<br>Levy                  | Suffix                        |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box<br>18401 Burbank Blvd., Suite 211 |                   | City (no abbreviations)<br>Tarzana | State<br>CA Zip Code<br>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.**

Date

10/20/20

Type or Print Name of Person Completing the Form

HARVEY H LEVY

Title

ACCNT

Signature

*[Signature]*