

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001483

FILED
May 13, 2008
Secretary of State

Entity Name: BRIDGEPOINT EDUCATION, INC.

Current Principal Place of Business:

13500 EVENING CREEK DRIVE
SUITE 600
POWAY, CA 92128

New Principal Place of Business:

13500 EVENING CREEK DRIVE
SUITE 600
SAN DIEGO, CA 92128

Current Mailing Address:

13500 EVENING CREEK DRIVE
SUITE 600
SAN DIEGO, CA 92128

New Mailing Address:

FEI Number: 59-3551629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: CLARK, ANDREW
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

Title: VCS () Delete
Name: TURNER, SCOTT
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

Title: CFO () Delete
Name: DEVINE, DANIEL J
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

Title: D (X) Delete
Name: STROUSE, MIMI
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

Title: D (X) Delete
Name: CRAIG, RYAN
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

Title: D (X) Delete
Name: WENRICH, BILL
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: ISBISTER, STEVEN
Address: 13500 EVENING CREEK DRIVE, SUITE 600
City-St-Zip: SAN DIEGO, CA 92128

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

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: STEVEN ISBISTER

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05/13/2008

Electronic Signature of Signing Officer or Director

_____ Date