

F06000007076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

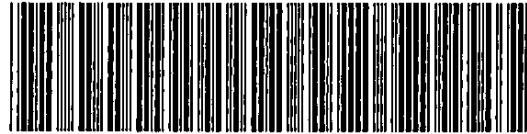
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA

C.J. 11-14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Measured Progress, Inc.
(Name of Corporation – must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Lisa Cooper
(Name of Person)

Measured Progress, Inc.
(Firm/Company)

100 Education Way

(Address)

Dover, NH 03821
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Cooper at (603) 749-9102 x2319
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Measured Progress, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. Delaware

(State or country under the law of which it is incorporated)

3. 31-1668672

(FEI number, if applicable)

4. September 1, 1999

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. NA

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 100 Education Way, Dover, NH 03821

(Principal office address)

P.O. Box 1217, Dover, NH 03820

(Current mailing address)

8. Test development and related services

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CT Corporation System

Office Address: 1200 S. Pine Island Rd.

Plantation

(City)

Florida

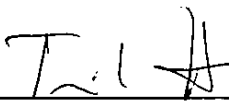
33324

(Zip Code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



TRACI HOUCK
SPECIAL ASSISTANT SECRETARY

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached list

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached list

Address: _____

Vice President: _____

Address: _____

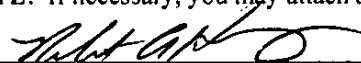
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  11/8/06
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert Kmetz, Treasurer
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Measured Progress, Inc.

Board of Directors & Officers

Directors

Alice Irby
680 Lake Forest Drive SE
Pinehurst, NC 28374

Tom Flygare, Chairman of the Board
Flygare, Schwarz & Closson
11 Court Street
P.O. Box 439
Exeter, NH 03833

Hy Waxman
28 Agawam Rd
Sharon, MA 02067

Officers

Stuart Kahl, President
100 Education Way
P.O. Box 1217
Dover, NH 03821-1217

Alice Irby, Secretary
680 Lake Forest Drive SE
Pinehurst, NC 28374

Richard Rizzo, Senior Vice President/CFO
100 Education Way
P.O. Box 1217
Dover, NH 03821-1217

Robert Kmetz, Treasurer
100 Education Way
P.O. Box 1217
Dover, NH 03821-1217

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEASURED PROGRESS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF OCTOBER, A.D. 2006.



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060987301

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5157007

DATE: 10-30-06