

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # F96000003118 (4)
 1. Corporation Name
EDUCAID INC.



Principal Place of Business 3301 C STREET, SUITE 200 SACRAMENTO CA 95816	Mailing Address P O BOX 160408 SACRAMENTO CA 95816-408 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30		3. Date Incorporated or Qualified 06/20/1996	4. FEI Number 22-3400682	Applied For <input type="checkbox"/> Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
--	--	--	--	---	--	--	--

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TURTLETAUB, MARC		1.2 NAME
STREET ADDRESS	3301 "C" STREET, SUITE 100-M		1.3 STREET ADDRESS
CITY-ST-ZIP	SACRAMENTO CA 95818		1.4 CITY-ST-ZIP
TITLE	DV	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EBER, PAUL		2.2 NAME
STREET ADDRESS	3301 "C" STREET, SUITE 100-A		2.3 STREET ADDRESS
CITY-ST-ZIP	SACRAMENTO CA 95818		2.4 CITY-ST-ZIP
TITLE	P	<input type="checkbox"/> DELETE	3.1 TITLE President, Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REEVES, JOHN		3.2 NAME
STREET ADDRESS	3301 "C" STREET, SUITE 100-B		3.3 STREET ADDRESS
CITY-ST-ZIP	SACRAMENTO CA 95818		3.4 CITY-ST-ZIP
TITLE	VD	<input type="checkbox"/> DELETE	4.1 TITLE Executive Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TURTLETAUB, ALAN		4.2 NAME
STREET ADDRESS	2840 MORRIS AVENUE		4.3 STREET ADDRESS
CITY-ST-ZIP	UNION NJ 07083		4.4 CITY-ST-ZIP
TITLE	VSD	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEAR, MORTON		5.2 NAME
STREET ADDRESS	2840 MORRIS AVENUE		5.3 STREET ADDRESS
CITY-ST-ZIP	UNION NJ 07083		5.4 CITY-ST-ZIP
TITLE	T	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUGLISI, HARRY		6.2 NAME
STREET ADDRESS	2840 MORRIS AVE		6.3 STREET ADDRESS
CITY-ST-ZIP	UNION NJ		6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Paul R. Eber* **Paul R. Eber, Executive Vice President 916-554-8550 March 30, 1998**

CR2E084 (10/97)