

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002992

FILED
Apr 29, 2005
Secretary of State

Entity Name: SCIENTIFIC LEARNING CORPORATION

Current Principal Place of Business:

300 FRANK H. OGAWA PLAZA
SUITE 500
OAKLAND, CA 946122040

New Principal Place of Business:

Current Mailing Address:

300 FRANK H. OGAWA PLAZA
SUITE 500
OAKLAND, CA 946122040

New Mailing Address:

FEI Number: 94-3234458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: BOWEN, ROBERT C
Address: 300 FRANK OGAWA PLAZA, STE 600
City-St-Zip: OAKLAND, CA 94612

Title: D () Delete
Name: MERZENICH, MICHAEL DR.
Address: 20 HILLPOINT
City-St-Zip: SAN FRANCISCO, CA 94117

Title: D () Delete
Name: TALLAL, PAULA DR.
Address: 197 UNIVERSITY AVE
City-St-Zip: NEWARK, NJ 07102

Title: V () Delete
Name: JENKINS, WILLIAMS E DR.
Address: 348 FARALLON AVE.
City-St-Zip: PACIFICA, CA 94044

Title: V () Delete
Name: MILLER, STEVE DR.
Address: 5 ELK CT.
City-St-Zip: PACIFICA, CA 94044

Title: TCFO () Delete
Name: FREEMAN, JANE A
Address: 300 FRANK OGAWA PLAZA, STE 600
City-St-Zip: OAKLAND, CA 94612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 for the exemption stated in Section 119.07(3)(i), 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: JANE FREEMAN

TCFO

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date