

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004207

Entity Name: K12 FLORIDA L.L.C.

FILED  
Apr 11, 2009  
Secretary of State

## Current Principal Place of Business:

2300 CORPORATE PARK DRIVE  
200  
HERNDON, VA 20171

## New Principal Place of Business:

8000 WESTPARK DRIVE, STE. 500  
MCLEAN, VA 22102

## Current Mailing Address:

2300 CORPORATE PARK DRIVE  
200  
HERNDON, VA 20171

## New Mailing Address:

8000 WESTPARK DRIVE, STE. 500  
MCLEAN, VA 22102

FEI Number: 02-0703223

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

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: K12 MANAGEMENT INC.  
Address: 2300 CORPORATE PARK DRIVE, SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: SVP (X) Delete  
Name: DAVIS, BRUCE SVP  
Address: 2300 CORPORATE PARK DRIVE, SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: TRES (X) Delete  
Name: JOHN, BAULE TRES.  
Address: 2300 CORPORATE PARK DRIVE, SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: SEC. (X) Delete  
Name: POLSKY, HOWARD SEC  
Address: 2300 CORPORATE PARK DRIVE, SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: SVP (X) Delete  
Name: ZOGBY, CHARLES SVP  
Address: 2300 CORPORATE PARK DRIVE, SUITE 200  
City-St-Zip: HERNDON, VA 20171

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: K12 MANAGEMENT INC.  
Address: 8000 WESTPARK DRIVE, STE. 500  
City-St-Zip: MCLEAN, VA 22102

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JANE LOUIS

POA

04/11/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date