

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000003855

**Entity Name:** CARNEGIE LEARNING INC

**Current Principal Place of Business:**

501 GRANT STREET  
STE 1075  
PITTSBURGH, PA 15219-4447

**Current Mailing Address:**

501 GRANT STREET  
STE 1075  
PITTSBURGH, PA 15219-4447 US

**FEI Number:** 25-1805640

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title CEO, PRESIDENT, DIRECTOR  
Name MALKIN, BARRY  
Address 501 GRANT STREET  
STE 1075  
City-State-Zip: PITTSBURGH PA 15219-4447

Title CHIEF PRODUCT OFFICER,  
SECRETARY, DIRECTOR  
Name LACASSE, PETER  
Address 501 GRANT STREET  
STE 1075  
City-State-Zip: PITTSBURGH PA 15219-4447

Title TREASURER  
Name KATRUSKA, JULIE  
Address 501 GRANT STREET  
STE 1075  
City-State-Zip: PITTSBURGH PA 15219-4447

Title DIRECTOR, MDP MANAGER  
Name NORTON, MATTHEW  
Address 501 GRANT STREET  
STE 1075  
City-State-Zip: PITTSBURGH PA 15219-4447

*I hereby 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 all other like empowered.*

**SIGNATURE:** BARRY MALKIN

**CEO, PRESIDENT,  
DIRECTOR**

**03/06/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date