2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001575

Entity Name: LEARNING AND TEACHING DIVISION INC.

Current Principal Place of Business:

43 FOUNDRY AVE. WALTHAM, MA 02453

Current Mailing Address:

43 FOUNDRY AVE. WALTHAM, MA 02453 US

FEI Number: 04-2241718 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 22, 2016

Secretary of State

CC3382179913

Officer/Director Detail :

Title SENIOR VICE PRESIDENT Title **VCFO**

BRADY, JOANNE Name Name HOFFMAN-BRAY, CHERYL

43 FOUNDRY AVE. 43 FOUNDRY AVE. Address Address WALTHAM MA 02453 WALTHAM MA 02453 City-State-Zip: City-State-Zip:

SENIOR VICE PRESIDENT & Title Title SENIOR VICE PRESIDENT & **SECRETARY**

TREASURER

WALTHAM MA 02453

Name MURPHY, SIOBHAN ROTNER, ROBERT Name 43 FOUNDRY AVE. 43 FOUNDRY AVE. Address Address

City-State-Zip: WALTHAM MA 02453 City-State-Zip: WALTHAM MA 02453

Title TRUSTFF Title PRESIDENT AND CEO, TRUSTEE

Name BRYANT, ANNE OFFENSEND, DAVID Name Address 43 FOUNDRY AVE. Address 43 FOUNDRY AVE. WALTHAM MA 02453 City-State-Zip:

Title **TRUSTEE** Title TRUSTEE

Name CODDING, JUDY CLEWELL, BEATRIZ Name Address 43 FOUNDRY AVE. Address 43 FOUNDRY AVE.

City-State-Zip: WALTHAM MA 02453 City-State-Zip: WALTHAM MA 02453

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/22/2016 SVP, SECRETARY SIGNATURE: SIOBHAN MURPHY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

TitleTRUSTEETitleTRUSTEENameHOFMANN, PAULNameKUMAR, VIJAYAddress43 FOUNDRY AVE.Address43 FOUNDRY AVE.City-State-Zip:WALTHAM MA 02453City-State-Zip:WALTHAM MA 02453

Title TRUSTEE Title TRUSTEE

NameMACARTHUR, WILLIAMNamePEIRCE, ROBERTAddress43 FOUNDRY AVE.Address43 FOUNDRY AVE.City-State-Zip:WALTHAM MA 02453City-State-Zip: WALTHAM MA 02453

Title TRUSTEE Title TRUSTEE

NameROBERTS, LINDANameSTEWART, VIVIENAddress43 FOUNDRY AVE.Address43 FOUNDRY AVE.City-State-Zip:WALTHAM MA 02453City-State-Zip: WALTHAM MA 02453

Title TRUSTEE Title TRUSTEE

NameWICKES, GAILNameSUOMI, MARVINAddress43 FOUNDRY AVE.Address43 FOUNDRY AVE.City-State-Zip:WALTHAM MA 02453City-State-Zip:WALTHAM MA 02453