2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2007 8:00 am Secretary of State **DOCUMENT #844061** 04-30-2007 90856 045 ***150.00 1. Entity Name HARCOURT ASSESSMENT, INC. Principal Place of Business Mailing Address 40093980 ATTN: CORP TAX DEPT 19500 BULVERDE RD SAN ANTONIO, TX 78259 US 6277 SEA HARBOR DR ORLANDO, FL 32821 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03282007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 13-1188180 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEXISNEXIS DOCUMENT SOLUTIONS INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. SVP Delete TITLE TITLE ☐ Change ☐ Addition RICE, THOMAS K NAME NAME 19500 BULVERDE ROAD STREET ADDRESS STREET ADDRESS SAN ANTONIO, TX 78259 CITY-ST-ZIP CITY-ST-ZIP TITLE SVP Delete THLE Change ☐ Addition JORGENSEN, MARGARET NAME NAME 19500 BULVERDE ROAD STREET ADDRESS STREET ADDRESS SAN ANTONIO, TX 78259 CITY-ST-ZIP CITY - ST-ZIP C/D TITLE ☐ Delete TITLE ☐ Addition TIERNEY, PATRICK J NAME NAME Floor Park Avenue STREET ADDRESS 125 PARK AVENUE STREET ADDRESS 10017 NEW YORK, NY 10017 CITY - ST - ZIP CITY - ST-ZIP Uew York TITLE CEOP Delete TITLE /CEO Change Addition GALT, JEFFERY S NAME NAME HANSEN, MICHAEL E 19500 BULVERDE RD STREET ADORESS STREET ADDRESS RD 19500 BULVERDE CITY-ST-ZIP SAN ANTONIO, TX 78259 CITY-ST-ZIP 78a59 BAN ANTONID TITLE ☐ Delete TITLE ☐ Change ☐ Addition FOGARTY, KENNETH E NAME NAME STREET ADDRESS 2 NEWTON PLACE, SUITE 350, 3RD FLOOR STREET ADDRESS CITY-ST-ZIP NEWTON, MA 02458 CITY-ST-ZIP D/SYP/CFO/AT TIFLE **CFOV** Delete TITLE X Change ☐ Addition TOPOL, BARRY NAME NAME TOPOL, BARRY C 19500 BULVERDEE RD STREET ADDRESS STREET ADDRESS 19500 BULVERDE

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SAN ANTONIO

*7825*9

CITY ST-ZIP

SAN ANTONIO, TX 78259

Harcourt Assessment, Inc.

Directors, Officers Report Document# 844061

ATTACHMENT

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