

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 856041

Entity Name: PEARSON EDUCATION, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

ONE LAKE STREET
UPPER SADDLE RIVER, NJ 07458 US

New Principal Place of Business:

Current Mailing Address:

C/O KAREN ZHANG
PEARSON INC.
NEW YORK, NY 10019 US

New Mailing Address:

FEI Number: 22-1603684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE, FL 32301 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: CFOD () Delete
Name: WERNER, GEORGE
Address: ONE LAKE ST
City-St-Zip: UPPER SADDLE RIVER, NJ 07458

Title: CEOP () Delete
Name: SCARDINO, MARJORIE
Address: ONE LAKE ST
City-St-Zip: UPPER SADDLE RIVER, NJ 07458

Title: SSD () Delete
Name: DANCY, ROBERT L
Address: ONE LAKE ST
City-St-Zip: UPPER SADDLE RIVER, NJ 07458

Title: VPAS () Delete
Name: WHARTON, TOM
Address: 1330 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10019

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:

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 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: THOMAS WHARTON

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date