

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # F01000001856****1. Entity Name**  
**EDUCATIONAL STANDARDS AND CERTIFICATIONS, INC.****FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90247 029 \*\*\*150.00

**Principal Place of Business****ATTN: JAAN E. VAINO**  
**335 WEST 16TH STREET, 5TH FLOOR**  
**NEW YORK, NY 10011****Mailing Address****ATTN: JAAN E. VAINO**  
**335 WEST 16TH STREET, 5TH FLOOR**  
**NEW YORK NY 10011****2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

**4. FEI Number****06-1557372**

Applied For

Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired** ☐**\$8.75 Additional**  
**Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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.****SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**9. This corporation is eligible to satisfy its Intangible**  
**Tax filing requirement and elects to do so.**  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State****10. Election Campaign Financing**  
Trust Fund Contribution. ☐**\$5.00 May Be**  
**Added to Fees****11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11****TITLE** **P** ☒ Delete  
**NAME** **ATKINSON, MARK**  
**STREET ADDRESS** **335 WEST 16TH STREET, 5TH FLOOR**  
**CITY-ST-ZIP** **NEW YORK NY 10011****TITLE** **D** ☐ Change ☒ Addition  
**NAME** **HICKEY, JANET**  
**STREET ADDRESS** **277 PARK AVENUE, 42ND FLOOR**  
**CITY-ST-ZIP** **NEW YORK NY 10172****TITLE** **ST** ☐ Delete  
**NAME** **FIEDLER, JEFFREY**  
**STREET ADDRESS** **335 WEST 16TH STREET, 5TH FLOOR**  
**CITY-ST-ZIP** **NEW YORK NY 10011****TITLE** **D** ☐ Change ☒ Addition  
**NAME** **MARGOLIS, MICHAEL**  
**STREET ADDRESS** **1 COURT STREET**  
**CITY-ST-ZIP** **BOSTON MA 02108****TITLE** **D** ☐ Delete  
**NAME** **PEA, ROY**  
**STREET ADDRESS** **333 RAVENSWOOD AVE., BN 124**  
**CITY-ST-ZIP** **MENLO PARK CA 94025****TITLE** **D** ☐ Change ☒ Addition  
**NAME** **REGAN, JAMES**  
**STREET ADDRESS** **660 MADISON AVENUE, 14TH FLOOR**  
**CITY-ST-ZIP** **NEW YORK NY 10021****TITLE** **D** ☐ Delete  
**NAME** **SMITH, MARSHALL**  
**STREET ADDRESS** **402 T CERAS**  
**CITY-ST-ZIP** **STANFORD CA 94305****TITLE** **D** ☐ Change ☒ Addition  
**NAME** **WEISS, JUANNE**  
**STREET ADDRESS** **46 GERRY STREET, #401**  
**CITY-ST-ZIP** **SAN FRANCISCO, CA 94102****TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** **P** ☐ Change ☒ Addition  
**NAME** **FINNERTY, MICHAEL**  
**STREET ADDRESS** **335 WEST 16TH ST, 5TH FLOOR**  
**CITY-ST-ZIP** **NEW YORK, NY 10011****TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** **D** ☐ Change ☒ Addition  
**NAME** **KAPLAN, ANDY**  
**STREET ADDRESS** **10 EAST 53RD ST, 25TH FLOOR**  
**CITY-ST-ZIP** **NEW YORK, NY 10020****13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment # Doc# F01000001856  
B0088471

Attachment to 2002 Uniform Business Report

Document #F01000001856

Entity Name: Educational Standards and Certifications, Inc.

Additions/Changes To Officers and Directors in 11

Title: C Change

Atkinson, Mark

335 West 16<sup>th</sup> Street, 5<sup>th</sup> Floor

New York, NY 10011

Title: D Addition

Sherman, David

260 Park Avenue South

New York, NY 10021