

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 10, 2007 8:00 am**  
**Secretary of State**

09-10-2007 90002 036 \*\*\*158.75

<b>DOCUMENT # F01000002376</b>					
<b>1. Entity Name</b> <b>EXCELLIGENCE LEARNING CORPORATION</b>					
<b>Principal Place of Business</b> 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940 US			<b>Mailing Address</b> 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940 US		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		<b>4. FEI Number</b> 77-0559897	
Zip		Country		<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>				<b>7. Name and Address of New Registered Agent</b>	
NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331				Name Street Address (P.O. Box Number is Not Acceptable) City	
<b>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.</b>				FL Zip Code	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	PD ELLIOTT, RONALD 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D DELANEY, RICHARD 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940	<input checked="" type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	VCOO MCGUINN, JUDITH 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	VS ARORA, VIKAS 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940	<input checked="" type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	C MACDONALD, ROBERT 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940	<input checked="" type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D CASAGRANDE, LOUIS 2 LOWER RAGSDALE DRIVE, SUITE 200 MONTEREY, CA 93940	<input checked="" type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	VS MIKE GAITLEY 2 LOWER RAGSDALE DR #200 MONTEREY, CA 93940	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D MERRICK AXEL 2 LOWER RAGSDALE DR #200 MONTEREY CA 93940	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D CARL THOMA 2 LOWER RAGSDALE DR #200 MONTEREY CA 93940	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>12. I hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> <b>mtchael Gaitley</b> <b>8-21-07</b> <b>831-333-2000</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					