

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002376

FILED
Apr 16, 2008
Secretary of State

Entity Name: EXCELLIGENCE LEARNING CORPORATION

Current Principal Place of Business:

2 LOWER RAGSDALE DRIVE, SUITE 200
MONTEREY, CA 93940 US

New Principal Place of Business:

Current Mailing Address:

2 LOWER RAGSDALE DRIVE, SUITE 200
MONTEREY, CA 93940 US

New Mailing Address:

FEI Number: 77-0559897 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PD () Delete
Name: ELLIOTT, RONALD
Address: 2 LOWER RAGSDALE DRIVE, SUITE 200
City-St-Zip: MONTEREY, CA 93940 US

Title: VCOO () Delete
Name: MCGUINN, JUDITH
Address: 2 LOWER RAGSDALE DRIVE, SUITE 200
City-St-Zip: MONTEREY, CA 93940 US

Title: VS () Delete
Name: GAITLEY, MIKE
Address: 2 LOWER RAGSDALE DRIVE, SUITE 200
City-St-Zip: MONTEREY, CA 93940 US

Title: D () Delete
Name: AXEL, MERRICK
Address: 2 LOWER RAGSDALE DRIVE, SUITE 200
City-St-Zip: MONTEREY, CA 93940 US

Title: D () Delete
Name: THOMA, CARL
Address: 2 LOWER RAGSDALE DRIVE, SUITE 200
City-St-Zip: MONTEREY, CA 93940 US

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:

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: JEFF BURNS

V

04/16/2008

Electronic Signature of Signing Officer or Director

Date