

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000343

FILED  
Apr 14, 2010  
Secretary of State

Entity Name: K12 INC.

**Current Principal Place of Business:**

8000 WESTPARK DRIVE, STE. 500  
MCLEAN, VA 22102

**New Principal Place of Business:**

2300 CORPORATE PARK DR. SUITE 200  
HERNDON, VA 20171

**Current Mailing Address:**

8000 WESTPARK DRIVE, STE. 500  
MCLEAN, VA 22102

**New Mailing Address:**

2300 CORPORATE PARK DR. SUITE 200  
HERNDON, VA 20171

FEI Number: 95-4774688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DCEO  
Name: PACKARD, RONALD J DIRCEO  
Address: 2300 CORPORATE PARK DR. SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: SVPS  
Name: POLSKY, HOWARD SVPGCS  
Address: 2300 CORPORATE PARK DR. SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: CFO  
Name: BAULE, JOHN CFO  
Address: 2300 CORPORATE PARK DR. SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: DIR  
Name: WILFORD, THOMAS DIR  
Address: 2300 CORPORATE PARK DR. SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: DIR  
Name: SWIFT, JANE DIR  
Address: 2300 CORPORATE PARK DR. SUITE 200  
City-St-Zip: HERNDON, VA 20171

Title: DIR  
Name: FUTRELL, MARY DIR  
Address: 2300 CORPORATE PARK DR. SUITE 200  
City-St-Zip: HERNDON, VA 20171

I hereby 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 all other like empowered.

SIGNATURE: MANDELINE HENDRICKS

POA

04/14/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date