

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

APPROVAL
AND
FILED

DOCUMENT # 1F03000000343

1. Entity Name

K12 INC.



03 MAR 12 AM 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1250 FOURTH STREET

3. Mailing Address
1250 FOURTH STREET

Suite, Apt. #, etc.
SUITE 550

Suite, Apt. #, etc.
SUITE 550

City & State
SANTA MONICA, CA

City & State
SANTA MONICA, CA

4. FEI Number 95-4774688

Applied For
Not Applicable

Zip
90401

Country
USA

Zip
90401

Country
USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

500014686155

03/25/03--01068--013 **150.00

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name C T CORPORATION SYSTEM

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

1200 SOUTH PINE ISLAND ROAD

City PLANTATION

FL

Zip Code
33324

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chairman and Director
BENNETT, WILLIAM J
1250 4th St., Ste. 550, Santa Monica CA 90401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCFO
EISCHEID, THEODORE
1250 4th St., Ste. 550, Santa Monica CA 90401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
KYMAN, DAVID S
1250 4th St., Ste. 550, Santa Monica CA 90401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOD
PACKARD, RONALD J
1250 4th St., Ste. 550, Santa Monica CA 90401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HOLDREN, JOHN
1250 4th St., Ste. 550, Santa Monica CA 90401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
SAXBERG, BROR
1250 4th St., Ste. 550, Santa Monica CA 90401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or on an attachment with an address, with another like empowered.

SIGNATURE:

Ronald J. Packard

2/28/2003

RONALD J. PACKARD, Chief Executive Officer

Date

Daytime Phone #

CR2E034B (12/02)