2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001078

Entity Name: LEAPFROG ENTERPRISES, INC.

FILED May 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6401 HOLLIS STREET, SUITE 150 EMERYVILLE, CA 94608 **Current Mailing Address: New Mailing Address:** 6401 HOLLIS STREET, SUITE 150 EMERYVILLE, CA 94608 FEI Number: 95-4652013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: FINK, STEVE Name: KATZ, JEFFREY 1250 FOURTH STREET, SIXTH FLOOR 6401 HOLLIS STREET Address: Address: City-St-Zip: SANTA MONICA, CA 90401 City-St-Zip: EMERYVILLE, CA 94608 VC Title: Title: (X) Delete () Change () Addition Name: RIOUX, PAUL Name: 6401 HOLLIS STREET, SUITE 150 Address: Address: EMERYVILLE, CA 94608 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition WONG, PETER Name: Name: 6401 HOLLIS STREET, SUITE 150 Address: Address: EMERYVILLE, CA 94608 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition SMITH, RALPH R Name: Name: Address: 701 ST PAUL ST Address: City-St-Zip: BALTIMORE, MD 21202 City-St-Zip: Title: () Delete Title: () Change () Addition WANG, CADEN Name: Name: 6401 HOLLIS ST., STE 150 Address: Address: City-St-Zip: EMERYVILLE, CA 94608 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MARON, STAN Name: 1250 FOURTH STREET, SUITE 550 Address: Address: City-St-Zip: City-St-Zip: SANTA MONICA, CA 90401

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: PETER WONG SECR 05/07/2007