2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003290

Entity Name: SPECTRUM K12 SCHOOL SOLUTIONS, INC.

FILED May 19, 2008 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|--|--------------------------------|--|---|--|-----------------------------------|
| 901 DULANCY VALLEY ROAD, SUITE 800 TOWSON, MD 21204 | | | 901 DULANEY VALLEY ROAD, SUITE 800 TOWSON, MD 21204 | | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 901 DULANCY VALLEY ROAD, SUITE 800 TOWSON, MD 21204 | | | 901 DULANEY VALLEY ROAD, SUITE 800 TOWSON, MD 21204 | | | |
| FEI Number: | 52-2282245 | FEI Number Applied For () | FEI Nun | nber Not Appli | cable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the Other of Florida. | | | | | | |
| in the State of Florida. | | | | | | |
| SIGNATUR | | ic Signature of Registered Age | nt | | | 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 DIRECTOR | | | | | | ES TO OFFICERS AND DIRECTORS: |
| Title: Name: Address: City-St-Zip: | MARSHALL, JAI | ALLEY ROAD, SUITE 800 | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () WARBURG, PIN 466 LEXINGTOI NEW YORK, NY | NAVE 10TH FL | | Title: Name: Address: City-St-Zip: | OSWALD, JO | DN AVENUE 17TH FLOOR |
| Title: Name: Address: City-St-Zip: | D () NOVAK, ROGER 7501 WISCONS BETHESDA, MD | IN AVE | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () MEYERS, TIM 11955 FREEDO RESTON, VA 20 | M DR SUITE 7000 | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () WALSH, MARK 509 7TH STREE WASHINGTON, | | | Title: Name: Address: City-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () PUGLIESE, LOU 12704 POND CI OAK HILL, FL 2 | REST LN | | Title: Name: Address: City-St-Zip: | D BRANSTAD, 3200 GRAND DES MOINES | D AVENUE |

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: CYNTHIA LOCKWOOD SEC 05/19/2008