

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003672

FILED  
Mar 18, 2009  
Secretary of State

Entity Name: THE LEARNING EDGE NORTH AMERICA, INC.

## Current Principal Place of Business:

245 FIRST STREET, RIVERVIEW II, 18TH FLOOR  
CAMBRIDGE, MA 02142

## New Principal Place of Business:

## Current Mailing Address:

245 FIRST STREET, RIVERVIEW II, 18TH FLOOR  
CAMBRIDGE, MA 02142

## New Mailing Address:

FEI Number: 98-0515688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## 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: DP ( ) Delete  
Name: NERMUT, MICHAEL A  
Address: 10 NICHOLAS DRIVE  
City-St-Zip: SANDY BAY, TASMANIA AUSTRALIA, 7005

Title: D ( ) Delete  
Name: KURIAN, JIM Z  
Address: 69 LINDHILL AVENUE  
City-St-Zip: GEILSTON BAY TASMINAI AUSTRALIA, 7015

Title: D ( ) Delete  
Name: CROGER, PETER W  
Address: 9 BOUGHTON AVENUE  
City-St-Zip: MOUNT NELSON TASMINAI AUSTRALIA, 7007

Title: DTS ( ) Delete  
Name: ROBINSON, JAMES A  
Address: 27 SHERPARD STREET  
City-St-Zip: SANDY BAY TASMANIA AUSTRALIA, 7005

Title: CEO ( ) Delete  
Name: CUPITT, ROBERT A  
Address: J JOYCE AVENUE, OAKLEIGH SOUTH  
City-St-Zip: MELBOURNE AUSTRALIA, 3167

Title: S ( ) Delete  
Name: PLOUSSIOS, GREGORY J  
Address: 111 HUNTINGTON AVENUE  
City-St-Zip: BOSTON, MA 021997613

## 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:

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: ALISON R. NAFTAL

MGR

03/18/2009

Electronic Signature of Signing Officer or Director

Date