

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000645

Entity Name: PROSCHOOLS, INC.

FILED  
Feb 04, 2011  
Secretary of State

**Current Principal Place of Business:**

10225 SW PARK WAY  
PORTLAND, OR 97225

**New Principal Place of Business:**

**Current Mailing Address:**

10225 SW PARK WAY  
PORTLAND, OR 97225

**New Mailing Address:**

FEI Number: 93-0588426

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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: WILES, JEFF  
Address: 10225 SW PARKWAY  
City-St-Zip: PORTLAND, OR 97225

Title: S  
Name: SAUER, BRIAN  
Address: 10225 SW PARKWAY  
City-St-Zip: PORTLAND, OR 97225

Title: CFO  
Name: SHEAHAN, PATRICK  
Address: 10225 SW PARKWAY  
City-St-Zip: PORTLAND, OR 97225

Title: D  
Name: LOGAN, DAVID  
Address: 10225 SW PARKWAY  
City-St-Zip: PORTLAND, OR 97225

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: PATRICK SHEAHAN

CFO

02/04/2011

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

\_\_\_\_\_  
Date