2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004831

FILED Apr 30, 2010 Secretary of State

Entity Name: THE OPEN UNIVERSITY (INCORPORATED BY ROYAL CHARTER)

Current Principal Place of Business:

New Principal Place of Business:

THE OPEN UNIVERSITY

THE OPEN UNIVERSITY WALTON HALL

101N MONROE STREET, SUITE 1090 TALLAHASSEE, FL 323011547

MILTON KEYNES, UK MK76AA UK

Current Mailing Address:

New Mailing Address:

C/O R. MICHAEL UNDERWOOD 101 N MONROE STREET, SUITE 1090 C/O FIONA C CRAWFORD 2040 WHITFIELD AVENUE

TALLAHASSEE, TA 323011547

SARASOTA, FL 34243

FEI Number:

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RAMSEY, JOHN H ROSKAMP FOUNDATION IRREVOCABLE TRUST 2040 WHITFIELD AVE SARASOTA, FL 34243 US

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

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

Title: D

Name: LORD CHRISTOPHER HASKINS, BARON OF SKIDBY

Address: WALTON HALL

City-St-Zip: MILTON KEYNES, UK MK76AA UK

Title: D

Name: GOURLEY, BRENDA PROFESS

Address: WALTON HALL

City-St-Zip: MILTON KEYNES, UK MK76AA UK

Title:

Name: LORD DAVID PUTTNAM

Address: WALTON HALL

City-St-Zip: MILTON KEYNES, UK MK76AA UK

Title:

Name: WOODBURN, FRASER MR

Address: WALTON HALL

City-St-Zip: MILTON KEYNES, UK MK76AA UK

Title:

Name: DELBRIDGE, RICHARD MR

Address: WALTON HALL

City-St-Zip: MILTON KEYNES, UK MK76AA UK

Title: PD

Name: CRAWFORD, FIONA C PD Address: 2040 WHITFIELD AVENUE City-St-Zip: SARASOTA, FL 34243 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FIONA C CRAWFORD

PD

04/30/2010