

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000597

FILED  
Jun 25, 2009  
Secretary of State

Entity Name: OSI EDUCATION SERVICES, INC.

**Current Principal Place of Business:**

2520 SOUTH 170TH ST  
NEW BERLIN, WI 53151 US

**New Principal Place of Business:**

507 PRUDENTIAL ROAD  
HORSHAM, PA 19044 US

**Current Mailing Address:**

2520 SOUTH 170TH ST  
PO BOX 510955  
NEW BERLIN, WI 531510955 US

**New Mailing Address:**

3850 N. CAUSEWAY BLVD.  
SUITE 200  
METAIRIE, LA 70002 US

FEI Number: 39-1357406

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

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:**

Title: PD ( ) Delete  
Name: BARRIST, MICHAEL J  
Address: 507 PRUDENTIAL ROAD  
City-St-Zip: HORSHAM, PA 19044

Title: TASD ( ) Delete  
Name: SCHWAB, JOHN R  
Address: 507 PRUDENTIAL ROAD  
City-St-Zip: HORSHAM, PA 19044

Title: SD ( ) Delete  
Name: GINDIN, JOSHUA  
Address: 507 PRUDENTIAL ROAD  
City-St-Zip: HORSHAM, PA 19044

**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:

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: JOSHUA GINDIN

SD

06/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date