## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000002992

Entity Name: SCIENTIFIC LEARNING CORPORATION

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
300 FRANK H. OGAWA PLAZA SUITE 500 OAKLAND, CA 946122040				300 FRANK H. OGAWA PLAZA SUITE 600 OAKLAND, CA 946122040 US			
Current Mailing Address:				New Mailing Address:			
300 FRANK H. OGAWA PLAZA SUITE 500 OAKLAND, CA 946122040				300 FRANK H. OGAWA PLAZA SUITE 600 OAKLAND, CA 946122040 US			
FEI Number:	94-3234458	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	ew Registered Agent:	
2731 EXEC SUITE 4	VICES, INC. CUTIVE PARK I FL 33331 US	DRIVE					
	named entity s e of Florida.	ubmits this statement for the pu	rpose o	f changing it	ts registered of	fice or registered agent, or bot	h,
SIGNATUR	RE:						_
	Electroni	c Signature of Registered Agen	it			Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BOWEN, ROBER	AWA PLAZA, STE 600		Title: Name: Address: City-St-Zip:	MYERS, D . AND	AWA PLAZA, STE 600	
Title: Name: Address: City-St-Zip:	D () MERZENICH, MI 20 HILLPOINT SAN FRANCISCO			Title: Name: Address: City-St-Zip:	FELLER, ROBE	AWA PLAZA, STE 600	
Title: Name: Address: City-St-Zip:	D () TALLAL, PAULA 197 UNIVERSIT NEWARK, NJ 0	Y AVE		Title: Name: Address: City-St-Zip:	CARLONI, LINDA	AWA PLAZA, STE 600	
Title: Name: Address: City-St-Zip:	V () JENKINS, WILLI 348 FARALLON PACIFICA, CA 9	AVE.		Title: Name: Address: City-St-Zip:	JENKINS, WILLI	AWA PLAZA, SUITE 600	
Title: Name: Address: City-St-Zip:	V () MILLER, STEVE 5 ELK CT. PACIFICA CA 9			Title: Name: Address: City-St-Zip:	BOWEN, ROBEI	AWA PLAZA, SUITE 600	

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.

Title:

Name:

Address:

City-St-Zip:

DIR

BLANCHARD, EDWARD V

OAKLAND, CA 94612

(X) Change ( ) Addition

300 FRANK OGAWA PLAZA, STE 600

SIGNATURE: ROBIN MARIENLUND FOR BOB FELLER, CFO ACCT 03/10/2009

Title:

Name:

Address:

TCFO

City-St-Zip: OAKLAND, CA 94612

FREEMAN, JANE A

( ) Delete

300 FRANK OGAWA PLAZA, STE 600