## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 19, 2006 08:00 AM Secretary of State

By: Debra J. Markwitz, Asst. Sec.

DOCUMENT # M0400002700  1. Entity Name EDUCATION STATION, LLC							Secreta	ry of Stat	e
Principal Plac	e of Busines	s	Mailing Address						
1001 FLEET ST BALTIMORE, MD 21202			1001 FLEET ST BALTIMORE, MD 21202				1		
BALTIMORE,	IND LILUL	•	Dietimote, iib 21252			4 ABBUEBIO 100	t weste wedet water water wat	(1 MW(C) WWCH TOWA (MMC) WHICE	CEICEI III ICCI
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Sulte, Apt. #, etc.		-	02272006	Chg-LLC	CR2E083 (11/05	5)
City & State			City & State			4. FEI Numb	_	-	Applied For Not Applicable
Zip	Zip Country		Zip Coun		ntry	37-146	of Status Desired	□ \$5.00 A	dditional
	& Name	and Address of Current	Paristared Agent		1	}		Fee Requi	red
6. Name and Address of Current Registered Agent Name						7. Name and Address of New Registered Agent			
CAPITOL 1333 N DU	CORPOR JVAL ST	ATE SERVICES, INC	- · · S		Street Address (	s (P.O. Box Number is Not Acceptable)			
TALLAHASSEE, FL 32303									
					City			FL Zip Co	ode
8. The above	named entit	v submits this statement for	the ourpose of changing its	register	ed office or register	red agent, or bo	th, in the State of Flo		h, and accept
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature: typed or printed name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
Filing Fee is \$50.00 Due by May 1, 2006								e check payable to Department of St	
9.		MANAGING MEMBE	IS/MANAGERS 10.				ADDITIONS/		
TITLE NAME	MGRM	T LEARNING, LLC					U000	00519025	Addition
STREET ADDRESS	1001 FLE				EET ADDRESS		, 05/02/0	6-80036-008	3 50.00
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NAME			<del></del>	NAM	- I:		1		
STREET ADDRESS CITY-ST-ZIP					-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.  EDUCATION STATION, LLC									
	B	y: Catapult Le	earning, LLC, 1	Manag	ging Membe	r	(	(410)84	
SIGNATURE: DELLA SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING MANAGER, MANAGER, OR AUTHORIZED REPRESENTATIVE DELLA DEPUTE TO DELLA									