# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 29, 2011**
**Secretary of State**

DOCUMENT# M07000006966

**Entity Name:** DISCOVERY EDUCATION ASSESSMENT LLC

**Current Principal Place of Business:**

ONE DISCOVERY PLACE
SILVER SPRING, MD 209103354

**New Principal Place of Business:**

**Current Mailing Address:**

ONE DISCOVERY PLACE
9TH FLOOR
SILVER SPRING, MD 209103354

**New Mailing Address:**

**FEI Number: 26-1097835** **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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR
Name: ZASLAV, DAVID
Address: ONE DISCOVERY PLACE
City-St-Zip: SILVER SPRING, MD 209103354

Title: MGR
Name: LIGUORI, PETER
Address: ONE DISCOVERY PLACE
City-St-Zip: SILVER SPRING, MD 209103354

Title: SVP
Name: FILUT, MARC
Address: ONE DISCOVERY PLACE
City-St-Zip: SILVER SPRING, MD 209103354

Title: CFO
Name: SINGER, BRAD
Address: ONE DISCOVERY PLACE
City-St-Zip: SILVER SPRING, MD 209103354

Title: MGR
Name: CAMPBELL, BRUCE
Address: ONE DISCOVERY PLACE
City-St-Zip: SILVER SPRING, MD 209103354

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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 Statues.

SIGNATURE: MARC FILUT SVP 04/29/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date