

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04748

FILED
Feb 12, 2009
Secretary of State

Entity Name: KAPLAN EDUCATIONAL CENTERS, INC.

Current Principal Place of Business:

888 SEVENTH AVENUE
23RD FLOOR
NEW YORK, NY 10106 US

New Principal Place of Business:

Current Mailing Address:

888 SEVENTH AVENUE
23RD FLOOR
NEW YORK, NY 10106 US

New Mailing Address:

FEI Number: 22-2573250 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: GRAYER, JONATHAN N
Address: 888 7TH AVE
City-St-Zip: NEW YORK, NY 10106

Title: D () Delete
Name: GRAHAM, DONALD E
Address: 1150 15TH ST NW
City-St-Zip: WASHINGTON, DC 20071

Title: VPT () Delete
Name: LANE, ROBERT L
Address: 888 SEVENTH AVENUE
City-St-Zip: NEW YORK, NY 10106

Title: CEOC () Delete
Name: GRAYER, JONATHAN N
Address: 888 SEVENTH AVE
City-St-Zip: NEW YORK, NY 10106

Title: PC () Delete
Name: ROSEN, ANDREW S
Address: 888 SEVENTH AVENUE
City-St-Zip: NEW YORK, NY 10106

Title: EVCA () Delete
Name: DILLON, VERONICA
Address: 888 SEVENTH AVENUE
City-St-Zip: NEW YORK, NY 10106

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: ROSEN, ANDREW S
Address: 6301 UNIVERSITY DRIVE
City-St-Zip: FT LAUDERDALE, FL 33309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MATTERA, MAUREEN
Address: 888 SEVENTH AVE
City-St-Zip: NEW YORK, NY 10106

Title: C (X) Change () Addition
Name: ROSEN, ANDREW S
Address: 888 SEVENTH AVENUE
City-St-Zip: NEW YORK, NY 10106

Title: AS (X) Change () Addition
Name: DILLON, VERONICA
Address: 1150 15 STREET NW
City-St-Zip: WASHINGTON, DC 20071

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: MAUREEN MATTERA

VP

02/12/2009

Electronic Signature of Signing Officer or Director

_____ Date