

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34507

FILED
Apr 20, 2012
Secretary of State

Entity Name: XEROX EDUCATION SERVICES, INC.

Current Principal Place of Business:

2828 N HASKELL AVE
BLDG 1 FL 9
DALLAS, TX 75204

New Principal Place of Business:

Current Mailing Address:

2828 N HASKELL AVE
BLDG 1 FL 9
DALLAS, TX 75204

New Mailing Address:

FEI Number: 95-2501112 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: P
Name: SCHNACKER, RICHARD K
Address: ONE WORLD TRADE CENTER
City-St-Zip: LONG BEACH, CA 90831

Title: D
Name: LONDON, JOHN A
Address: 2828 N HASKELL AVE, BLDG 1 FL 10
City-St-Zip: DALLAS, TX 75204

Title: VP
Name: REXFORD, JOHN H
Address: 2828 N HASKELL AVE, BLDG 1 FL 10
City-St-Zip: DALLAS, TX 75204

Title: VPDS
Name: PEFFER, J MICHAEL
Address: 2828 N HASKELL AVE, BLDG 1 FL 9
City-St-Zip: DALLAS, TX 75204

Title: VPAS
Name: GROSSMAN, STEPHANIE
Address: 2828 N HASKELL AVE, BLDG 1 FL 9
City-St-Zip: DALLAS, TX 75204

Title: T
Name: SEEGAL, RHONDA L
Address: 45 GLOVER AVENUE
City-St-Zip: NORWALK, CT 06856

I hereby 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 all other like empowered.

SIGNATURE: J. MICHAEL PEFFER

VPDS

04/20/2012

Electronic Signature of Signing Officer or Director

_____ Date