2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000021354

Entity Name: LEARNSOMETHING.COM, INC.

Apr 08, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2457 CARE DRIVE TALLAHASSEE, FL 32308 **Current Mailing Address: New Mailing Address:** 2457 CARE DRIVE TALLAHASSEE, FL 32308 FEI Number: 59-3236696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PIERCE, ROBERT A 227 SOUTH CALHOUN STREET TALLAHASSEE, FL 32301 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CEOD () Delete () Change () Addition CRUMPACKER, WILLIAM J III Name: Name: 837 BROOKWOOD DR Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: BLANTON, THOMAS M Name: 1215 BUCKINGHAM DR Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: () Delete Title: Title: CD () Change () Addition MILLER, WILTON R Name: Name: 3015 WINDSOR WAY Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: () Delete Title: () Change () Addition MOSLEY, CHARLIE Name: Name: Address: 9 N PARKWAY SQUARE, 4200 NORTHSIDE PARKWAY Address: City-St-Zip: ATLANTA, GA 30327 City-St-Zip: Title: Title: () Delete () Change () Addition WATTERS, WAYNE Name: Name: P.O. BOX 351 Address: Address: TALLAHASSEE, FL 32301 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition VERVILLE, ANNE-LEE Name: Name: GREENE, TOM E 359 STICKNEY HILL ROAD 1555 JENNINGS MILL ROAD, STE. 600-D Address: Address: City-St-Zip: HOPKINTON, NH 03229 City-St-Zip: BOGART, GA 30622

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM J. CRUMPACKER CEOD 04/08/2002

EUREK, PAUL D. 616 MOUNTAIN ROAD WOODSTOCK, GA 30188