2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2017
Secretary of State
CC9539379860

DOCUMENT# F14000001602

Entity Name: HIGHSCOPE EDUCATIONAL RESEARCH FOUNDATION, INC.

Current Principal Place of Business:

600 NORTH RIVER STREET
YPSILANTI, MI 48198

Current Mailing Address:

600 NORTH RIVER STREET
YPSILANTI, MI 48198

FEI Number: 23-7001501

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONTEALEGRE, CAROL C
1322 CASTILE AVENUE
CORAL GABLES, FL 33134 US

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

Officer/Director Detail :

Title	C
Name	BREDEKAMP, SUE
Address	2608 CREST AVENUE
City-State-Zip:	CHEVERLY MD 20785

Title	D
Name	MARTELLA, JANA
Address	1025 THOMAS JEFFERSON STREET, NW, STE 700
City-State-Zip:	WASHINGTON DC 20007

Title	CFO
Name	SCHWARTZ, STEVE
Address	600 NORTH RIVER STREET
City-State-Zip:	YPSILANTI MI 48198

Title	CHIEF OPERATING OFFICIER
Name	HRATCHIAN, ARMEN
Address	600 N RIVER ST
City-State-Zip:	YPSILANTI MI 48198

Title	D
Name	LOPEZ, MICHAEL L
Address	4550 MONTGOMERY AVENUE, SUITE 800 NORTH
City-State-Zip:	BETHESA MD 20814-3343

Title	P
Name	POLK, CHERYL
Address	600 NORTH RIVER STREET
City-State-Zip:	YPSILANTI MI 48198

Title	CHIEF STRATEGY OFFICIER
Name	LEGER, BRENDA
Address	600 NORTH RIVER STREET
City-State-Zip:	YPSILANTI MI 48198

Title	D
Name	LASH FREEMAN, BONNIE
Address	3617 NORTHWEST PARKWAY
City-State-Zip:	LOUISVILLE KY 40212

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN SCHWARTZ CFO 02/13/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	C
Name	STIPEK, DEBORAH
Address	130 FOX HOLLOW
City-State-Zip:	WOODSIDE CA 94062