

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04748

**Entity Name:** KAPLAN EDUCATIONAL CENTERS, INC.**Current Principal Place of Business:**1515 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309**Current Mailing Address:**ATTN: TAX DEPARTMENT  
12735 MORRIS ROAD, SUITE 260  
ALPHARETTA, GA 30004 US**FEI Number:** 22-2573250**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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           TREASURER, CFO  
Name           SEELYE, MATTHEW C.  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           VICE PRESIDENT AND SECRETARY  
Name           AUFANG, Yael  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           DIRECTOR  
Name           MADDREY, NICOLE  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           ASSISTANT TREASURER  
Name           CORSEY, KEVIN  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           DIRECTOR, CEO  
Name           ROSEN, ANDREW S.  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           DIRECTOR  
Name           O'SHAUGHNESSY, TIMOTHY J.  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           CEO, DIRECTOR  
Name           ROSEN, ANDREW S.  
Address       1515 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** CORSEY, KEVIN**ASSISTANT TREASURER   02/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date