| No. C 194781 | | Due | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|---|--|--|---|--|-------------------|-------------------------|--|
| Return to: | | Annual Report Form | | | INCORP SERVICES, INC. 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. IMAGINE LEARNING, INC. CURTIS B HILL 191 RIVER PARK DR PROVO UT 84604 | | BOISE ID USA | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| 4. Corporations: Enter Na | mes and Busin | ess Addresses of F | President, Secretary, and Directors. Treas | surer (optional). | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT DIRECTOR SECRETARY | JOE N SWENSON SUSAN W PREATOR CURTIS B HILL | | 191 RIVER PARK DRIVE 191 RIVER PARK DR 191 RIVER PARK DR | PROVO PROVO PROVO | ர ர ர | USA USA USA | 84604 84604 84604 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| UT C 194781 | | Signature: Curtis B. Hill Name (type or print): Curtis B. Hill | | Action Action Action | Date: 05/08/2013 Title: Chief Financial Officer | | | |
| Processed 05/08/2013 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |