

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001483

Entity Name: BRIDGEPOINT EDUCATION, INC.**Current Principal Place of Business:**13500 EVENING CREEK DRIVE NORTH
SAN DIEGO, CA 92128**Current Mailing Address:**13500 EVENING CREEK DRIVE NORTH
SAN DIEGO, CA 92128 US**FEI Number:** 59-3551629**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH 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 CEO
Name CLARK, ANDREW
Address 13500 EVENING CREEK DRIVE
 NORTH
City-State-Zip: SAN DIEGO CA 92128

Title CFO
Name DEVINE, DAN
Address 13500 EVENING CREEK DRIVE
 NORTH
City-State-Zip: SAN DIEGO CA 92128

Title DIRECTOR
Name HACKETT, PATRICK
Address 13500 EVENING CREEK DRIVE
 NORTH
City-State-Zip: SAN DIEGO CA 92128

Title DIRECTOR
Name HARTMAN, ROBERT
Address 13500 EVENING CREEK DRIVE
 NORTH
City-State-Zip: SAN DIEGO CA 92128

Title SECRETARY
Name THOMPSON, DIANE
Address 13500 EVENING CREEK DRIVE
 NORTH
City-State-Zip: SAN DIEGO CA 92128

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: DIANE THOMPSON**SECRETARY****04/05/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date