

2017 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	CFO
Name	DEVINE, DAN
Address	13500 EVENING CREEK DRIVE NORTH
City-State-Zip:	SAN DIEGO CA 92128

Title	CEO
Name	CLARK, ANDREW
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****04/15/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date