

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001483

Entity Name: ZOVIO INC**Current Principal Place of Business:**1811 E. NORTHROP BLVD
CHANDLER, AZ 85286**Current Mailing Address:**1811 E. NORTHROP BLVD
CHANDLER, AZ 85286 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 DIRECTOR
Name MARRINER, KIRSTEN M.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title DIRECTOR
Name KIELY, JOHN J.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title DIRECTOR
Name HORN, MICHAEL B.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title DIRECTOR
Name CRAIG, RYAN D.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title DIRECTOR
Name CARROLL, TERESA S.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title PRESIDENT
Name PERNSTEINER, GEORGE
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title CFO
Name ROYAL, KEVIN
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title SECRETARY
Name THOMPSON, DIANE
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

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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****03/23/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name COLE, MICHAEL P.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286

Title DIRECTOR
Name NICHOLS, VICTOR K.
Address 1811 E. NORTHROP BLVD
City-State-Zip: CHANDLER AZ 85286