2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001483

Entity Name: BRIDGEPOINT EDUCATION, INC.

FILED May 13, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:					
13500 EVENING CREEK DRIVE SUITE 600 POWAY, CA 92128				13500 EVENING CREEK DRIVE SUITE 600 SAN DIEGO, CA 92128					
Current Mailing Address:				New Mailing Address:					
13500 EVENING CREEK DRIVE SUITE 600 SAN DIEGO, CA 92128									
FEI Number: 59-3551629 FEI Number Applied For () FEI Num					nber Not Applicable () Certificate of Status Desired ()				
Name and	Address of Cu	rrent Registered Agent:	Name and	ame and Address of New 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.									
SIGNATUR	E:								
Electronic Signature of Registered Agent						Da	ate		
Election Cam	paign Financing 1	Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	CLARK, ANDREW	CREEK DRIVE, SUITE 600		Title: Name: Address: City-St-Zip:	() Change ()	Addition		
Title: Name: Address: City-St-Zip:	VCS () D TURNER, SCOTT 13500 EVENING SAN DIEGO, CA	CREEK DRVIE, SUITE 600		Title: Name: Address: City-St-Zip:	ISBISTER, ST	NG CREEK DR	Addition		
Title: Name: Address: City-St-Zip:	DEVINE, DANIEL	CREEK DRIVE, SUITE 600		Title: Name: Address: City-St-Zip:	() Change()	Addition		
Title: Name: Address: City-St-Zip:	STROUSE, MIMI	pelete CREEK DRIVE, SUITE 600 92128		Title: Name: Address: City-St-Zip:	() Change ()	Addition		
Title: Name: Address: City-St-Zip:	CRAIG, RYAN	oelete CREEK DRIVE, SUITE 600 92128		Title: Name: Address: City-St-Zip:	() Change ()	Addition		
Title: Name: Address: City-St-Zip:	WENRICH, BILL	oelete CREEK DRIVE, SUITE 600 92128		Title: Name: Address: City-St-Zip:	() Change ()	Addition		
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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									

SIGNATURE: STEVEN ISBISTER S 05/13/2008

above, or on an attachment with an address, with all other like empowered.