

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000003290

**Entity Name:** SPECTRUM K12 SCHOOL SOLUTIONS, INC.

**Current Principal Place of Business:**

1313 LONE OAK ROAD  
EAGAN, MN 55121

**FILED**  
**May 02, 2014**  
**Secretary of State**  
**CC0481461875**

**Current Mailing Address:**

1313 LONE OAK ROAD  
ATTN: LEGAL DEPT.  
EAGAN, MN 55121 US

**FEI Number: 52-2282245**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CT 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           DAWSON, CHARLES T  
Address        10931 LAUREATE DRIVE  
City-State-Zip: SAN ANTONIO TX 78249

Title           DAS  
Name           TAIBI, EDWARD P  
Address        35 EAST 62ND STREET  
City-State-Zip: NEW YORK NY 10065

Title           DCFO  
Name           FERA, JR., PETER A.  
Address        10931 LAUREATE DRIVE  
City-State-Zip: SAN ANTONIO TX 78249

Title           SVPS  
Name           NORRIS, JUDY C  
Address        10931 LAUREATE DRIVE  
City-State-Zip: SAN ANTONIO TX 78249

Title           VPT  
Name           WEXLER, MARTIN H  
Address        10931 LAUREATE DRIVE  
City-State-Zip: SAN ANTONIO TX 78249

Title           VP, ASST. SECRETARY  
Name           JOHNSON, KEVIN A.  
Address        400 SW 6TH AVENUE  
                  SUITE 600  
City-State-Zip: PORTLAND OR 97204

Title           CEO  
Name           BRUEGGEMAN, KEVIN  
Address        1313 LONE OAK ROAD  
City-State-Zip: EAGAN MN 55121

*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: KEVIN A. JOHNSON**

**VP/ASSIST SECRETARY**

**05/02/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date