

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90301 035 \*\*\*150.00

60026311



01202006 Chg-P CR2E034 (11/05)

<b>DOCUMENT # F05000003290</b>					
1. Entity Name 4GL SCHOOL SOLUTIONS, INC					
Principal Place of Business 901 DULANCY VALLEY ROAD, SUITE 800 TOWSON, MD 21204			Mailing Address 901 DULANCY VALLEY ROAD, SUITE 800 TOWSON, MD 21204		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 52-2282245	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DUQUETTA, ALLISON		NAME	See Attached Listing	
STREET ADDRESS	901 DULANEY VALLEY ROAD, SUITE 800		STREET ADDRESS		
CITY-ST-ZIP	TOWNSON, MD 21204		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KANE, LYNNE ESQ		NAME		
STREET ADDRESS	901 DULANEY VALLEY ROAD, SUITE 800		STREET ADDRESS		
CITY-ST-ZIP	TOWNSON, MD 21204		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YANCISIN, MARC		NAME	See Attached Listing	
STREET ADDRESS	901 DULANEY VALLEY ROAD, SUITE 800		STREET ADDRESS		
CITY-ST-ZIP	TOWNSON, MD 21204		CITY-ST-ZIP		
TITLE	C	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EASTER, CLARK		NAME	See Attached Listing	
STREET ADDRESS	901 DULANEY VALLEY ROAD, SUITE 800		STREET ADDRESS		
CITY-ST-ZIP	TOWNSON, MD 21204		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MOORHEAD, RODMAN W III		NAME	↓	
STREET ADDRESS	901 DULANEY VALLEY ROAD, SUITE 800		STREET ADDRESS		
CITY-ST-ZIP	TOWNSON, MD 21204		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMITH, DAVID		NAME		
STREET ADDRESS	901 DULANEY VALLEY ROAD, SUITE 800		STREET ADDRESS		
CITY-ST-ZIP	TOWNSON, MD 21204		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Matthew Yancisin</u> MATTHEW YANCISIN 3.30.06 410.616.0876					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT

60026311

#F05000003290

4GL – OFFICERS - 2006

Allison L. Duquette  
President & Chief Executive Officer  
Direct: 410.616.0384

Matt Yansicin  
Treasurer  
Direct: 410.616.0276

Lynne Kane  
Secretary  
Direct: 410.616.0322

FAX: 410.616.0301 OR 410.616.0302

4GL School Solutions  
901 Dulaney Valley Road  
Suite 800  
Towson, MD 21204

Business Address above is the same for all three officers.

# ATTACHMENT

60026311 # F05000003290

## 4GL Board Of Directors - 2006

Clark Easter  
Founder & Chairman  
4GL School Solutions, Inc.  
6336 Gayton Place  
Malibu, CA 90265

Allison Duquette, Director  
4GL School Solutions, Inc.  
901 Dulaney Valley Road  
Suite 800  
Towson, MD 21204

Rodman W. Moorhead III, Director  
Warburg Pincus  
466 Lexington Avenue  
New York, NY 10017-3147

Roger Novak, Director  
Novak Biddle Venture Partners  
7501 Wisconsin Avenue  
East Tower, Suite #1380  
Bethesda, MD 21286

Mr. David Smith, Director  
Plato Learning  
10801 Nesbitt Avenue South  
Bloomington, MN 55437

Mr. Tim Meyers, Director  
Updata Capital  
11955 Freedom Drive  
Suite 7000  
Reston, VA 20190