2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000003413

Entity Name: C2 EDUCATIONAL SYSTEMS INC.

Current Principal Place of Business:

6465 EAST JOHNS CROSSING
STE 100
JOHNS CREEK, GA 30097

Current Mailing Address:

6465 EAST JOHNS CROSSING
STE 100
JOHNS CREEK, GA 30097 US

FEI Number: 22-3884949

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
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:

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Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	VC		Title	PD
Name	KENNEDY, DAVID		Name	KIM, DAVID
Address	1 EMBARCADERO CENTER - STE 1680		Address	6465 EAST JOHNS CROSSING - STE 100
City-State-Zip:	SAN FRANCISCO CA 94111		City-State-Zip:	JOHNS CREEK GA 30097
Title	D		Title	CEO
Name	OREIZY, NAVID		Name	WALLER, PETER
Address	1 EMBARCADERO CENTER - STE 1680		Address	6465 EAST JOHNS CROSSING STE 100
City-State-Zip:	SAN FRANCISCO CA 94111		City-State-Zip:	JOHNS CREEK GA 30097
Title	CFO		Title	OFFICER
Name	MOORE, MARTIN		Name	LOBO, ANDREW
Address	6465 EAST JOHNS CROSSING STE 100		Address	6465 EAST JOHNS CROSSING STE 100
City-State-Zip:	JOHNS CREEK GA 30097		City-State-Zip:	JOHNS CREEK GA 30097
Title	OFFICER			
Name	KENNA, BRYAN			
Address	6465 EAST JOHNS CROSSING STE 100			
City-State-Zip:	JOHNS CREEK GA 30097			

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: MARTIN MOORE   EVP & CFO   04/23/2020

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Electronic Signature of Signing Officer/Director Detail   Date