

1.) CORPORATION NAME: LA PETITE ACADEMY, INC.	DUE DATE: 6/30/2012						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street	SCC ID NO: F0409872						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td style="text-align: center;">1,000</td> </tr> <tr> <td>COMB</td> <td style="text-align: center;">1,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMA	1,000	COMB	1,000
CLASS	AUTHORIZED						
COMA	1,000						
COMB	1,000						
4.) STATE OR COUNTRY OF INCORPORATION: DE							

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 21333 HAGGERTY ROAD
STE 300

CITY/ST/ZIP: NOVI, MI 48375

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: BARBARA BECK TITLE: CEO/PRES ADDRESS: 21333 HAGGERTY RD STE 300 CITY/ST/ZIP/CO: NOVI, MI 48375	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
---------------------------------------------------------------------------------------------------------------	---------------------------------------------	-----------------------------------	--

NAME: TIM TRULY TITLE: CFO/TREASURER ADDRESS: 21333 HAGGERTY RD STE 300 CITY/ST/ZIP/CO: NOVI, MI 48375	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
-----------------------------------------------------------------------------------------------------------------	---------------------------------------------	-----------------------------------	--

NAME: IRA L YOUNG TITLE: SEC/VP ADDRESS: 21333 HAGGERTY RD STE 300 CITY/ST/ZIP/CO: NOVI, MI 48375	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
------------------------------------------------------------------------------------------------------------	---------------------------------------------	-----------------------------------	--

NAME: JAMES HOWLAND TITLE: CHRM/DIRECTOR ADDRESS: 1585 BROADWAY 39TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10036	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
---------------------------------------------------------------------------------------------------------------------------	---------------------------------------------	----------------------------------------------	--

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ IRA L YOUNG	IRA L YOUNG, SEC/VP	6/27/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.