

1.) CORPORATION NAME: <b>Ellucian Support Inc.</b>	DUE DATE: <b>1/31/2013</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA</b>	SCC ID NO: <b>F1027616</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4 COUNTRY VIEW RD  
CITY/ST/ZIP: MALVERN, PA 19355

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: JOHN F SPEER, III	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 4375 FAIR LAKES COURT				
CITY/ST/ZIP/CO: FAIRFAX, VA 22033				

NAME: JAMES D BENNETT	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: SR. VP/ASST SEC				
ADDRESS: 4 COUNTRY VIEW ROAD				
CITY/ST/ZIP/CO: MALVERN, PA 19355				

NAME: KEVIN M BOYCE	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: SR. VP/CFO/SEC				
ADDRESS: 4375 FAIR LAKES COURT				
CITY/ST/ZIP/CO: FAIRFAX, VA 22033				

NAME: JOHN T. GEORGES	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: VP/TREAS				
ADDRESS: 4375 FAIR LAKES COURT				
CITY/ST/ZIP/CO: FAIRFAX, VA 22033				

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/ JAMES D BENNETT	JAMES D BENNETT, SR. VP/ASST SEC	5/7/2013
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.