

1.) CORPORATION NAME:

Learning Ally, Inc.

DUE DATE: **4/30/2012**

SCC ID NO: **F1105719**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

**BANK OF AMERICA CENTER, 16TH FL 111 EAST MAIN
RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NJ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 20 ROSZEL RD

CITY/ST/ZIP: PRINCETON, NJ 08540-6294

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.

	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	MARC BARANSKI			
TITLE:	DIRECTOR			
ADDRESS:	SEMLER BROSSY CONSULTING GRP 116 VILLAGE BLVD SUITE 200			
CITY/ST/ZIP/CO:	PRINCETON, NJ 08540-			

	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	PETER C. ERICHSEN			
TITLE:	DIRECTOR			
ADDRESS:	ROPES & GRAY LLP PRUDENTIAL TOWER 800 BOYLSTON STREET			
CITY/ST/ZIP/CO:	BOSTON, MA 02199-			

	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	KETTNER GRISWOLD			
TITLE:	DIRECTOR			
ADDRESS:	8308 CARDEROCK DRIVE			
CITY/ST/ZIP/CO:	BETHESDA, MD 20817-			

	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	BRAD GROB			
TITLE:	VICE CHAIRMAN			
ADDRESS:	THE CAMBRIX GROUP, INC. 1139 ALVIRA STREET			
CITY/ST/ZIP/CO:	LOS ANGELES, CA 90035-			

	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	SIMON HALLETT			
TITLE:	Treasurer			
ADDRESS:	233 LURGAN ROAD			
CITY/ST/ZIP/CO:	NEW HOPE, PA 18938-			

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREW HOFER CHAIRMAN BROWN BROTHERS HARRIMAN & CO. 140 BROADWAY NEW YORK, NY 10005-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFF JARVIS DIRECTOR 141 DEER RIDGE ROAD BASKING RIDGE, NJ 07920-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBORAH JILLSON DIRECTOR LEXISNEXIS 125 PARK AVENUE, 24TH FLOOR NEW YORK, NY 10017-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARSHALL LOEB DIRECTOR C/O MICHAEL LOEB 41 E. 72ND STREET NEW YORK, NY 10021-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HAROLD J. LOGAN DIRECTOR 4150 HARRIS TRAIL ATLANTA, GA 30327-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CELESTE V. LOPES VICE CHAIRMAN C/O LEARNING ALLY INC. 20 ROSZEL ROAD PRINCETON, NJ 08540-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREW FRIEDMAN Pres/CEO/CFO LEARNING ALLY, INC. 20 ROSZEL ROAD PRINCETON, NJ 08540-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETER BERAN Chief Technolog LEARNING ALLY, INC. 20 ROSZEL ROAD PRINCETON, NJ 08540-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDY MALAVSKY Chief Marketing LEARNING ALLY, INC. 20 ROSZEL ROAD PRINCETON, NJ 08540-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	JANIS MITCHELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PRECISE RESOURCE, INC. 501 SCHROCK ROAD, SUITE 203		
CITY/ST/ZIP/CO:	WESTERVILLE, OH 43081-		
NAME:	KIMBERLEE S. PHELAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	WITHUMSMITH+BROWN, PC 5 VAUGHN DRIVE		
CITY/ST/ZIP/CO:	PRINCETON, NJ 08540-		
NAME:	CAROL R. SCHEMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Secretary		
ADDRESS:	151 BEACON STREET UNIT #4		
CITY/ST/ZIP/CO:	BOSTON, MA 02116-		
NAME:	SALLY E. SHAYWITZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11 CHESTNUT LANE		
CITY/ST/ZIP/CO:	WOODBRIIDGE, CT 06525-		
NAME:	SOONKYU SHIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7 SHERIDAN ROAD		
CITY/ST/ZIP/CO:	SUMMIT, NJ 07901-		
NAME:	JANE SMITH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1061 LIBERTY LANE		
CITY/ST/ZIP/CO:	BOGART, GA 30622-		
NAME:	STEPHEN M. SIEGEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	330 GARFIELD AVENUE		
CITY/ST/ZIP/CO:	POMONA, CA 91767-		
NAME:	S. BLEECKER TOTTEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	CB RICHARD ELLIS, INC. PARK 80 WEST PLAZA TWO 6TH FLOOR		
CITY/ST/ZIP/CO:	SADDLE BROOK, NJ 07663-		
NAME:	ROBERT WRITZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2800 S. UNIVERSITY BLVD. #77		
CITY/ST/ZIP/CO:	DENVER, CO 80210-		

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/ ANDREW FRIEDMAN
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

ANDREW FRIEDMAN,
Pres/CEO/CFO
PRINTED NAME AND CORPORATE
TITLE

2/24/2012
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.