

1.) CORPORATION NAME: <b>EDUCATIONAL CREDIT MANAGEMENT CORPORATION</b>	DUE DATE: <b>6/30/2012</b>		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX RD STE 301          GLEN ALLEN, VA 23060-6802</b>	SCC ID NO: <b>F1257437</b>		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
4.) STATE OR COUNTRY OF INCORPORATION: <b>MN</b>			

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 IMATION PLACE  
BLDG 2

CITY/ST/ZIP: OAKDALE, MN 55128

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: JANICE HINES TITLE: P/CEO ADDRESS: 1 IMATION PLACE BLDG 2 CITY/ST/ZIP/CO: OAKDALE, MN 55128	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
---	---	--	--

NAME: STEVEN A WELLVANG TITLE: SECRETARY ADDRESS: 1 IMATION PLACE BLDG 2 CITY/ST/ZIP/CO: OAKDALE, MN 55128	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
--	---	-----------------------------------	--

NAME: GREG VAN GUILDER TITLE: T/CFO ADDRESS: 1 IMATION PLACE, BLDG 2 CITY/ST/ZIP/CO: OAKDALE, MN 55128	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
---	---	-----------------------------------	--

NAME: ROBERTA C RAMO TITLE: DIRECTOR ADDRESS: 1 IMATION PLACE, BLDG 2 CITY/ST/ZIP/CO: OAKDALE, MN 55128	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
--	----------------------------------	--	--

NAME: ROBERT STEIN TITLE: DIRECTOR ADDRESS: 1 IMATION PLACE, BLDG 2 CITY/ST/ZIP/CO: OAKDALE, MN 55128	<input 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/ JANICE HINES	JANICE HINES, P/CEO	5/14/2012
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.