2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003123

Entity Name: THE MCLEAN HOSPITAL CORPORATION

Current Principal Place of Business:

115 MILL STREET BELMONT, MA 02478

Current Mailing Address:

115 MILL STREET

BELMONT. MA 02478 US

FEI Number: 04-2697981 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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:

Electronic Signature of Registered Agent

Date

Date

FILED Apr 10, 2013

Secretary of State

CC6584976393

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title **SECRETARY** RAUCH, SCOTT L. ELIAS, JOAN E. Name Name

50 STANIFORD STREET Address MCLEAN HOSPITAL Address 115 MILL STREET

10TH FLOOR

City-State-Zip: BELMONT MA 02478 City-State-Zip: BOSTON MA 02114

Title TREASURER, SVP Title ASST. SECRETARY Name LAGASSE, DAVID A. Name LUKEN, DONNA M. 115 MILL STREET 115 MILL STREET Address Address City-State-Zip: BELMONT MA 02478 City-State-Zip: BELMONT MA 02478

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/10/2013 SIGNATURE: DONNA M. LUKEN ASST. SECRETARY

Electronic Signature of Signing Officer/Director Detail