

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F00000002667

FILED
May 05, 2010
Secretary of State

Entity Name: INSTITUTE FOR FAMILY CENTERED SERVICES, INC.

Current Principal Place of Business:

313 CONGRESS STREET
5TH FLOOR
BOSTON, MA 02210

New Principal Place of Business:

Current Mailing Address:

313 CONGRESS STREET
5TH FLOOR
BOSTON, MA 02210

New Mailing Address:

FEI Number: 54-1503721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DIR
Name: FAY, JULIETTE E
Address: 313 CONGRESS ST., 5TH FLOOR
City-St-Zip: BOSTON, MA 02210

Title: DIR
Name: NARDELLA, BRUCE F
Address: 313 CONGRESS ST., 5TH FLOOR
City-St-Zip: BOSTON, MA 02210

Title: DIR
Name: HOLLER, DENIS M
Address: 313 CONGRESS ST., 5TH FLOOR
City-St-Zip: BOSTON, MA 02210

Title: SEC
Name: DERENZO, LINDA
Address: 313 CONGRESS ST., 5TH FLOOR
City-St-Zip: BOSTON, MA 02210

Title: ASTS
Name: IDELSON, SARAH E
Address: 313 CONGRESS ST.
City-St-Zip: BOSTON, MA 02210

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

SIGNATURE: SARAH E. IDELSON

ASTS

05/05/2010

Electronic Signature of Signing Officer or Director

Date