

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000005716

FILED
Nov 21, 2008
Secretary of State

Entity Name: CITY YEAR, INC.

Current Principal Place of Business:

287 COLUMBUS AVENUE
BOSTON, MA 02116

New Principal Place of Business:

Current Mailing Address:

287 COLUMBUS AVENUE
BOSTON, MA 02116

New Mailing Address:

FEI Number: 22-2882549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CT 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: MADONNA CUDDIHY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: WOODSUM, STEVE
Address: 222 BERKELEY STREET, 18TH FLOOR
City-St-Zip: BOSTON, MA 02116

Title: VCP () Delete
Name: JACOBS, ILENE
Address: 287 COLUMBUS AVENUE
City-St-Zip: BOSTON, MA 02116

Title: P () Delete
Name: BROWN, MICHAEL CEO
Address: 287 COLUMBUS AVENUE
City-St-Zip: BOSTON, MA 02116

Title: VP () Delete
Name: BALFANZ, JIM COO
Address: 287 COLUMBUS AVENUE
City-St-Zip: BOSTON, MA 02116

Title: S () Delete
Name: BARNES, EVELYN CFO
Address: 287 COLUMBUS AVENUE
City-St-Zip: BOSTON, MA 02116

Title: EVP () Delete
Name: COHEN, DAVID
Address: 1500 MARKET STREET
City-St-Zip: PHILADELPHIA, PA 19102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EVELYN BARNES

CFO

11/21/2008

Electronic Signature of Signing Officer or Director

Date