

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001356

FILED
Jan 03, 2008
Secretary of State

Entity Name: BRIGHT HORIZONS CHILDREN'S CENTERS, INC.

Current Principal Place of Business:

200 TALCOTT AVE. SOUTH
WATERTOWN, MA 02472 US

New Principal Place of Business:

200 TALCOTT AVE. SOUTH
ATTN: NICHOLAS VALENTINE
WATERTOWN, MA 02472 US

Current Mailing Address:

200 TALCOTT AVE. SOUTH
ATTN: NICHOLAS VALENTINE
WATERTOWN, MA 02742

New Mailing Address:

FEI Number: 04-2949680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCOD () Delete
Name: TOCIO, MARY ANN
Address: 200 TALCOTT AVE. SOUTH
City-St-Zip: WATERTOWN, MA 02472 US

Title: CFOT () Delete
Name: BOLAND, ELIZABETH
Address: 200 TALCOTT AVE. SOUTH
City-St-Zip: WATERTOWN, MA 02472 US

Title: CEOD () Delete
Name: LISSY, DAVID
Address: 200 TALCOTT AVE. SOUTH
City-St-Zip: WATERTOWN, MA 02472 US

Title: SVPD () Delete
Name: DREIER, STEPHEN
Address: 200 TALCOTT AVE. S
City-St-Zip: WATERTOWN, MA 02472

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:

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

SIGNATURE: STEPHEN DREIER

SVPD

01/03/2008

Electronic Signature of Signing Officer or Director

_____ Date