

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005275

FILED
Apr 16, 2009
Secretary of State

Entity Name: MAINE ADOPTION PLACEMENT SERVICE, INC.

Current Principal Place of Business:

P.O. BOX 772
45 SCHOOL STREET, SUITE 309
HOULTON, ME 04730

New Principal Place of Business:

45 SCHOOL STREET
SUITE 309
HOULTON, ME 04730

Current Mailing Address:

P.O. BOX 772
45 SCHOOL STREET, SUITE 309
HOULTON, ME 04730

New Mailing Address:

400 COMMONWEALTH AVE
STE. 5
BOSTON, MA 02215

FEI Number: 01-0348849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMY, BERGEN
1950 CURLING AVENUE
NAPLES, FL 34109 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: P () Delete
Name: SMITH, ROBERT F
Address: 208 LINCOLN AVENUE
City-St-Zip: RUTLAND, VT 05701

Title: T () Delete
Name: CANNING, MICHAEL
Address: 5 WOODBURY LANE
City-St-Zip: NATICK, MA 01760

Title: V () Delete
Name: CATERINE, MELINDA
Address: 161 DURHAM ROAD
City-St-Zip: FREEPORT, ME 04032

Title: BM () Delete
Name: FREDERICKS, AMY
Address: 19 CEFALO ROAD
City-St-Zip: WEST ROXBURY, MA 02132

Title: SC () Delete
Name: LAON, JOANN
Address: 12 CLOVERIAL LANE
City-St-Zip: SCARBOROUGH, ME 04074

Title: BM () Delete
Name: SMITH, OTIS
Address: 324 CALASIS ROAD
City-St-Zip: HOULTON, ME 04730

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: SC (X) Change () Addition
Name: LEON, JOANN
Address: 12 CLOVERIAL LANE
City-St-Zip: SCARBOROUGH, ME 04074

Title: BM (X) Change () Addition
Name: SUSAN, MCCONATHY
Address: 79 PRINCE STREET
City-St-Zip: JAMAICA PLAIN, MA 02130

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: STEPHANIE MITCHELL, EXECUTIVE DIRECTOR

EXEC

04/16/2009

Electronic Signature of Signing Officer or Director

Date