

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002861

Entity Name: HALEY & ALDRICH, INC.

FILED
Jan 05, 2010
Secretary of State

Current Principal Place of Business:

465 MEDFORD STREET, SUITE 2200
BOSTON, MA 02129

New Principal Place of Business:

Current Mailing Address:

465 MEDFORD STREET, SUITE 2200
BOSTON, MA 02129

New Mailing Address:

FEI Number: 04-2295689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: D
Name: SMITH, LAWRENCE P
Address: 465 MEDFORD STREET, SUITE 2200
City-St-Zip: BOSTON, MA 02129

Title: T
Name: ELIAS, GLEN M
Address: 465 MEDFORD ST., SUITE 2200
City-St-Zip: BOSTON, MA 02129

Title: D
Name: MIREMADI, MEHDI N
Address: 9040 FRIARS RD., STE. 220
City-St-Zip: SAN DIEGO, CA 92108

Title: D
Name: KISER, DAVID B
Address: 16 PHEASANT TRAIL
City-St-Zip: WESTON, MA 02493

Title: PCD
Name: BEVERLY, BRUCE E
Address: 465 MEDFORD STREET, SUITE 2200
City-St-Zip: BOSTON, MA 02129

Title: D
Name: FISHER, WILLIAM R
Address: 75 WASHINGTON AVENUE, STE. 203
City-St-Zip: PORTLAND, ME 04101

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: BRUCE E. BEVERLY

P

01/05/2010

Electronic Signature of Signing Officer or Director

Date