

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005678

FILED
May 03, 2011
Secretary of State

Entity Name: CENTER FOR COMPREHENSIVE SERVICES, INC.

Current Principal Place of Business:

313 CONGRESS ST.
BOSTON, MA 02210 US

New Principal Place of Business:

Current Mailing Address:
313 CONGRESS ST.
FIFTH FLOOR
BOSTON, MA 02210 US

New Mailing Address:

FEI Number: 37-1036318 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O 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: D
Name: MURPHY, EDWARD M
Address: 313 CONGRESS ST., 5TH FLOOR
City-St-Zip: BOSTON, MA 02210 US

Title: S
Name: DERENZO, LINDA
Address: 313 CONGRESS STREET, 5TH FLOOR
City-St-Zip: BOSTON, MA 02210 US

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

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

Title: ASTS
Name: IDELSON, SARAH E
Address: 313 CONGRESS ST., 5TH FLOOR
City-St-Zip: BOSTON, MA 02210 US

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

05/03/2011

Electronic Signature of Signing Officer or Director

Date