

1.) CORPORATION NAME:

INSTITUTE FOR FAMILY CENTERED SERVICES, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

DUE DATE: **10/31/2011**

SCC ID NO: **03291895**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 313 CONGRESS STREET, 5TH FLOOR

CITY/ST/ZIP: BOSTON, MA 02210-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: BRUCE F. NARDELLA
TITLE: PRESIDENT
ADDRESS: 313 CONGRESS ST.
5TH FLOOR
CITY/ST/ZIP/CO: BOSTON, MA 02210-

OFFICER

DIRECTOR

NAME: SARAH E. IDELSON
TITLE: ASST SECRETARY
ADDRESS: 313 CONGRESS ST.
5TH FLOOR
CITY/ST/ZIP/CO: BOSTON, MA 02210-

OFFICER

DIRECTOR

NAME: LINDA DERENZO
TITLE: SECRETARY
ADDRESS: 313 CONGRESS ST. 5TH FLOOR
CITY/ST/ZIP/CO: BOSTON, MA 02210-

OFFICER

DIRECTOR

NAME: DENIS M HOLLER
TITLE: TREASURER
ADDRESS: 313 CONGRESS ST, 5TH FLOOR
CITY/ST/ZIP/CO: BOSTON, MA 02210-

OFFICER

DIRECTOR

NAME: ROBERT M. MELIA
TITLE: DIRECTOR
ADDRESS: 313 CONGRESS ST, 5TH FLOOR
CITY/ST/ZIP/CO: BOSTON, MA 02210-

OFFICER

DIRECTOR

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	EDWARD M. MURPHY	
TITLE:	CEO	
ADDRESS:	313 CONGRESS ST. 5TH FLOOR	
CITY/ST/ZIP/CO:	BOSTON, MA 02210-	

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ SARAH E. IDELSON	SARAH E. IDELSON, ASST SECRETARY	10/31/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.