

1. Corporate ID No.

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

Providence, RI 02904-2615 401.222,3040

2010

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

401.222.30

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(c), cach corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Carporate ID No. 00086869	2. Name of Corporation CiviGenics					
3. Street Address Principal Business Office 35 Fairfield Place			City West Caldwell	State NJ	Zψ 07006	
4. Business Phone No. 5. State of Incorporation 973-226-2900 Delaware			A committee of the comm			
6. Brief Description of the Character of Community Corrections, In-	Prison Treatment, Ja	node Island Ail Management		77 - 44 (1994)		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name						
John J. Clancy						
Street Address 35 Fairfield Place			Street Address			
West Caldwell	State NJ	21p 07006	City	State	Zip	
Secretary Name Maria Carnevale			Treasurer Name			
Street Address 35 Fairfield Place			Street Address			
City West Caldwell	State NJ	Ζιφ 07006	City	State	Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name						
none			Tarceur Name			
Street Address			Street Address		3E C C C C C C C C C C C C C C C C C C C	
СЦт	State	Zip	City	State	88 C.C.	
Director Name			Director Name			
Street Address			Street Address		S SN S SN S SN C S SN	
CHy	State	Zip	City	State	A VIE	
9. SHARES AUTHORIZED	I	ı	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			352,922 53/,82/	Pleknes A	.00	
			458,232	Frefreis B	• 6/	
			0	The state of the s	. 0/	
This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.						
Under penalty of perjury, declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement						
contained herein are true and correct.						
File Date FEB 14 Check No.	2011		Signatury			
By: BY (771) 29-13 7213 FOR SECRETARY OF STATE USE ONLY			John J. Clancy Pyint or Type Name)		
			President Title	***	······································	
		•			Form 630 Rev. 08/08	