

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 MAR 15 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten initials]

DOCUMENT # F00000006499
1. Entity Name
Fidelity Investments Institutional Operations
Company, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
82 Devonshire Street
Suite, Apt. #, etc.

3. Mailing Address
82 Devonshire Street
Suite, Apt. #, etc.

City & State
Boston, MA

City & State
Boston, MA

Zip
02109

Country

Zip
02109

Country

4. FEI Number
04-2647786

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
CI Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

City
Plantation

FL Zip Code
33324

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Peter J. Smail 82 Devonshire Street Boston, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Stephen E. Tibbetts 82 Devonshire Street Boston, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Clerk Jay Freedman 82 Devonshire Street Boston, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Ellyn A. McColgan 82 Devonshire Street Boston, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gail McGovern 82 Devonshire Street Boston, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Peter J. Smail 82 Devonshire Street Boston, MA 02109

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Jay Freedman, Clerk March 12, 2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034B (12/01)