-2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Apr 26, 2006 8:00 am Secretary of State DOCUMENT # M00000002068 1. Entity Name 04-26-2006 90018 027 ****55.00 CITISTREET LLC Mailing Address Principal Place of Business ONE HERITAGE DRIVE ATTN: ELEEN COTTER- JP5S QUINCY MA 02171 ONE HERITAGE DRIVE QUINCY MA 02171 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) Applied For City & State City & State 4. FEI Number 04-3516284 Not Applicable Zip Country Country \$5.00 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50:00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. Manager Delete TITLE Change Addition TITLE MGRD Marc P. Brown NAME CLEZKO, PETER NAME One Lincoln St. - 34th Floor STREET ADDRESS 300 FIRST STAMFORD PLACE, 2ND FLOOR STREET ADDRESS CITY-ST-ZIP Boston, MA 02111 CITY-ST-ZIP STAMFORD CT 06902 Addition D Delete TITLE Manager ☐ Channe TITLE NAME NAME Peter Leahy FLEITES, AGUSTIN J One Lincoln St. - 34th Floor STREET ADDRESS ONE LINCOLN STREET, 30TH FLOOR STREET ADDRESS CITY-ST-ZIP BOSTON MA 02111 CITY+ST-ZIP Boston, MA G2111 Manager TITLE ☐ Defete TITLE ☐ Change Addition HESSTEIN, LAURIO Mahér. STREET ADDRESS STREET ADDRESS 388 GREENWICH STREET, 17TH FLOOR CITY-ST-ZIP CITY+ST-ZIP NEW YORK NY 10013 Manager TY Addition TITLE MGRM Delete. TITLE Change Josez A. Lopez NAME HOOLEY, JAY STREET ADDRESS 388 Greenwich St. - 21st Floor STREET ADDRESS 225 FRANKLIN ST., 4TH FLOOR CITY-ST-ZIP BOSTON MA 02111 CITY-ST-ZIP New York, NY 10013 MGR Delete Change Addition TITLE Manager HOPKINS, STEPHEN NAME Philip J. Lussier NAME 399 PARK AVENUE, 4TH FLOOR STREET ADDRESS STREET ADDRESS One Heritage Drive NEW YORK NY 10022 CITY-ST-ZIP CITY-ST-ZIP No. Quincy, MA 02171 ☐ Delete TITLE **Addition** TITLE Manager 🔄 Change JOHNSON, SHAWN NAME Robert S. Mathews NAME 388 Greenwhich St. - 17th Floor ONE LINCOLN STREET, 35TH FLOOR STREET ADDRESS STREET ADDRESS BOSTON MA 02111 New York, NY 10013 CITY-ST-ZIP CITY-ST-ZIP

FILED

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JUDIUM JUDIUM 3. 20. 06
SIGNATURE AND TYPED OR PRINJED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Chylline Phone #



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#- movocoodo68

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Senior Principal
State Street Global Advisors
State Street Financial Center
One Lincoln Street, 34th Floor
Boston, MA 02111

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Chief Administrative Officer
Global Private Client Group
Smith Barney
388 Greenwich Street, 17th Floor
New York, NY 10013

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State Street Global Advisors
State Street Financial Center
One Lincoln Street, 35th Floor
Boston, MA 02111

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One Heritage Drive
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Smith Barney
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New York, NY 10013

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New York, NY 10013

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New York, NY 10013

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State Street Corporation
One Lincoln Street, 15th floor
Boston, MA 02111