

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000006499

**FILED**  
**Mar 25, 2014**  
**Secretary of State**  
**CC2719987848**

**Entity Name:** FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.

**Current Principal Place of Business:**

245 SUMMER STREET, MZ F7B  
BOSTON, MA 02210

**Current Mailing Address:**

245 SUMMER STREET, MZ F7B  
BOSTON, MA 02210 US

**FEI Number: 04-2647786**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title P  
Name ADAMS, ROBERT  
Address 245 SUMMER STREET  
City-State-Zip: BOSTON MA 02210

Title T  
Name KOMISHANE, HARRIS  
Address 245 SUMMER STREET  
City-State-Zip: BOSTON MA 02210

Title D  
Name MACDONALD, JAMES M.  
Address 245 SUMMER STREET  
City-State-Zip: BOSTON MA 02210

Title D  
Name MCGRAW, GERARD  
Address 245 SUMMER STREET  
City-State-Zip: BOSTON MA 02210

Title ASSISTANT SECRETARY  
Name STAHL, PETER D.  
Address 245 SUMMER STREET  
City-State-Zip: BOSTON MA 02210

*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: PETER D. STAHL**

**ASSISTANT SECRETARY 03/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date