## **2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F0000006499

**Entity Name: FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS** 

COMPANY, INC.

**Current Principal Place of Business:** 

245 SUMMER STREET BOSTON, MA 02210

**Current Mailing Address:** 

245 SUMMER STREET 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

FILED Apr 17, 2013

**Secretary of State** 

CC4999162397

Officer/Director Detail:

Title P Title T

NameADAMS, ROBERTNameKOMISHANE, HARRISAddress245 SUMMER STREETAddress245 SUMMER STREETCity-State-Zip:BOSTON MA 02210City-State-Zip:BOSTON MA 02210

Title S Title D

NameSTURDY, SUSANNameMACDONALD, JAMES M.Address245 SUMMER STREETAddress245 SUMMER STREETCity-State-Zip:BOSTON MA 02210City-State-Zip:BOSTON MA 02210

Title D Title ASSISTANT SECRETARY

NameMCGRAW, GERARDNameSTAHL, PETER D.Address245 SUMMER STREETAddress245 SUMMER STREETCity-State-Zip:BOSTON MA 02210City-State-Zip:BOSTON MA 02210

Title ASSISTANT TREASURER
Name MORGAN, CHARLES M.
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 A.S.

Electronic Signature of Signing Officer/Director Detail

04/17/2013 Date