

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004163

**Entity Name:** T. ROWE PRICE RETIREMENT PLAN SERVICES, INC.

**FILED**  
**Apr 01, 2016**  
**Secretary of State**  
**CC6433751511**

**Current Principal Place of Business:**

100 EAST PRATT STREET  
CORPORATE RECORDS OM1400  
BALTIMORE, MD 21202-1009

**Current Mailing Address:**

100 EAST PRATT STREET  
CORPORATE RECORDS OM1400  
BALTIMORE, MD 21202-1009 US

**FEI Number:** 52-1714114

**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 CHAIRMAN, DIRECTOR  
Name BERNARD, EDWARD  
Address 100 E PRATT ST  
City-State-Zip: BALTIMORE MD 21202-1009

Title DIRECTOR, VP  
Name DAVID, SCOTT B  
Address 100 E. PRATT STREET  
City-State-Zip: BALTIMORE MD 21202

Title DIRECTOR, VP, SECRETARY  
Name OESTREICHER, DAVID  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202-1009

Title ASSISTANT SECRETARY  
Name FLISTER, JOAN E  
Address 100 EAST PRATT STREET  
CORPORATE RECORDS OM1400  
City-State-Zip: BALTIMORE MD 21202-1009

Title TREASURER, CONTROLLER, VP  
Name DIGNAN, TIMOTHY S  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202-1009

Title VP  
Name BANKS, STEVEN J  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202-1009

Title DIRECTOR, VP  
Name STRICKLAND, WILLIAM W JR  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202-1009

Title PRESIDENT  
Name DECAMILLO, AIMEE R.  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202

*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:** JOAN E. FLISTER

**ASSISTANT SECRETARY** 04/01/2016

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

\_\_\_\_\_  
Date