

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90007 017 ***150.00

DOCUMENT # 835382

1. Entity Name

MFS/SUN LIFE FINANCIAL DISTRIBUTORS, INC.



Principal Place of Business

**ONE SUN LIFE EXECUTIVE PARK
SC 1335
WELLESLEY HILLS MA 02481**

Mailing Address

**ONE SUN LIFE EXECUTIVE PARK
SC 1335
WELLESLEY HILLS MA 02481**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-2470476

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
NAME **MCNULTY, JAMES III**
STREET ADDRESS **ONE SUN LIFE EXECUTIVE PARK**
CITY-ST-ZIP **WELLESLEY HILLS MA 02481**

TITLE **Director** ☐ Change ☒ Addition
NAME **Salipante, Robert C.**
STREET ADDRESS **One Sun Life Executive Park**
CITY-ST-ZIP **Wellesley Hills, MA 02481**

TITLE **P** ☐ Delete
NAME **SIETZ, THOMAS**
STREET ADDRESS **500 BOYLSTON STREET**
CITY-ST-ZIP **BOSTON MA**

TITLE **President** ☒ Change ☐ Addition
NAME **Seitz, Thomas**
STREET ADDRESS **131 Oliver Street**
CITY-ST-ZIP **Boston, MA 02110**

TITLE **VPCC** ☒ Delete
NAME **GOSS, NORTON A II**
STREET ADDRESS **ONE SUN LIFE EXECUTIVE PARK**
CITY-ST-ZIP **WELLESLEY HILLS MA 02481**

TITLE **VP & Chief Compliance Officer** ☐ Change ☒ Addition
NAME **Maden, George E.**
STREET ADDRESS **One Sun Life Executive Park**
CITY-ST-ZIP **Wellesley Hills, MA 02481**

TITLE **D** ☐ Delete
NAME **BEAULIEU, MARTIN E**
STREET ADDRESS **500 BOYLSTON STREET**
CITY-ST-ZIP **BOSTON MA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☒ Delete
NAME **MADEN, GEORGE E**
STREET ADDRESS **15 MORSE RD.**
CITY-ST-ZIP **SHERBORN MA 01770**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **King, Ellen B.**
STREET ADDRESS **One Sun Life Executive Park**
CITY-ST-ZIP **Wellesley Hills, MA 02481**

TITLE **VPT** ☒ Delete
NAME **SCOON, DAVEY**
STREET ADDRESS **ONE SUN LIFE EXECUTIVE PARK**
CITY-ST-ZIP **WELLESLEY HILLS MA 02481**

TITLE **Fin Ops Principal & Treasurer** ☐ Change ☒ Addition
NAME **Jette, Jane F.**
STREET ADDRESS **One Sun Life Executive Park**
CITY-ST-ZIP **Wellesley Hills, MA 02481**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ellen B. King **Ellen B. King**

2/26/04

(781)446-2486

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Attachment
835382*

MFS/Sun Life Financial Distributors, Inc.

Officers

Nancy C. Atherton

Assistant Vice President & Tax Officer

Primary Address: Sun Life Financial
One Sun Life Executive Park
Wellesley Hills, Massachusetts 02481 (United States)

Thomas Benson

Director, Sales Desk

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

William P. Franca

Vice President, National Sales

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

Trevor V. Graham

Director & Divisional Controller

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

Karen M. Joyce

Director, National Accounts

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

Kristen M. Komer

Marketing Strategy Officer

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

Mark McDonough

Sales Support Officer

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

John A. McLean

Vice President, National Sales

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

Gregory J. McMillan

Assistant Vice President, National Accounts

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

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Peter J. Weir

Senior Divisional Vice President

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

John Welch

Director, Sales Desk

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)

Brett Woodyatt

Director, National Accounts

Primary Address: MFS/Sun Life Financial Distributors, Inc.
131 Oliver Street
Boston, Massachusetts 02110 (United States)