## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

# **DOCUMENT #835382**

1. Entity Name
SUN LIFE FINANCIAL DISTRIBUTORS, INC.



**FILED** Mar 06, 2007 8:00 am Secretary of State

03-06-2007 90005 009 \*\*\*150.00

					"				
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		I HAGIEI FACE	40030042				
2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E03	4 (12/06)	
City & State		City & State	City & State		4. FEI Number 04-247	•		<del></del>	plied For Applicable
Zip	Zip Country Zi		Country		5. Certificate	of Status Desired		8.75 Addi ee Required	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
				Name					
,C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)					
, 2,	on, 12 00021			City				Zip Code	
				City			FL	Zip Code	'
the obligati	named entity submits this statement for ions of registered agent.					th, in the State of Flo	orida. I am fa	miliar with,	and accept
	Signature, typed or printed name of registered agent	and title if applicable. (N	- Hegistere	d Agent signature requ	ired when reinstating)	Г	DATE		
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.	9. Election Cam Trust Fund Co		· •	55.00 May Be added to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11
TITLE	PD Delete		TITL	_				Change	☐ Addition
NAME				ie Eet address					
STREET ADDRESS CITY-ST-ZIP	751 5211211511121			Y-ST-ZIP					
TITLE	FOPT Delete 11T							☐ Change	Addition
NAME	JETTE, JANE F								
STREET ADDRESS	l ·			EET ADDRESS					
CITY-ST-ZIP	V.22.200. (			(-ST-ZIP					•••
TITLE	S Place Michael S	☐ Delete	TITL					☐ Change	☐ Addition
NAME STREET ADDRESS	Bloom, Michael S. One Sun Life Executive Park			ME Eet adoress					
CITY-ST-ZIP	1			r-ST-ZIP					
TITLE	D Delete III			E	<del> </del>			☐ Change	Addition
NAME	Davis, Scott M.		NAM	AE .					
STREET ADDRESS	One Sun Life Executive Park			EET ADDRESS					
CITY-SI-ZP Wellesley Hills, MA 02481 C			CITY	Y-ST-ZIP					
TITLE	D D	☐ Delete	TITL					☐ Change	☐ Addition
NAME STREET ADDRESS	Tay, mary m			EET ADDRESS					
CITY-ST-ZIP	"Ione bun Life Executive rark			Y-ST-ZIP					
TITLE	D	☐ Delete	TITE	.E	<del></del>			Change	☐ Addition
NAME	Friesen, Ronald H.		NAN	AE					
STREET ADDRESS	EET ADDRESS One Sun Life Executive Park			EET ADDRESS					
CITY-ST-ZIP	Wellesley Hills, M	02481		Y-ST-ZIP					,
	certify that the information supplied wit I on this report or supplemental report i rporation or the receiver or trustee amp , or on an attachment with an artifess								

MICTIE

WHEN OF SIGNING OFFICER OR DIRECTOR

Michael S. Bloom

3/1/07

781-416-2135 Daytime Phone #

# ATTACHMENT 40630042 TO 2 5 2 8

# Sun Life Financial Distributors, Inc.

### **Additional Officers:**

Kathleen T. Baron

**Chief Compliance Officer** 

Primary Address:

Sun Life Financial

One Sun Life Executive Park

Wellesley Hills, Massachusetts 02481

David G. Byrnes

National Sales Manager

Primary Address:

Sun Life Financial Distributors, Inc.

131 Oliver Street

Boston, Massachusetts 02110

Steven C. Cooney

Chief of Staff

Primary Address:

Sun Life Financial Distributors, Inc.

131 Oliver Street

Boston, Massachusetts 02110

Trevor V. Graham

AVP

Primary Address:

Sun Life Financial Distributors, Inc.

131 Oliver Street

Boston, Massachusetts 02110

Julia Holloway

VP

Primary Address:

Sun Life Financial Distributors, Inc.

131 Oliver Street

Boston, Massachusetts 02110

Janet V. Whitehouse

VP

Primary Address:

Sun Life Financial

One Sun Life Executive Park Wellesley Hills, Massachusetts