

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *F 9400000 3074*
1. Corporation Name

Fidelity Management Trust Company

Principal Place of Business
82 Devonshire Street
Mailzone: A8C
Boston, MA 02109

Mailing Address
82 Devonshire Street
Mailzone: A8C
Boston, MA 02109

3. Date Incorporated or Qualified **6/13/94** 3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number **04-2723880** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Corporation Company of Miami
1500 Miami Center
201 South Biscayne Boulevard
Miami, FL 33131

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person authorized to file this statement with the Department of State

(Date) Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**President & CEO
Denis McCarthy
30 Whiting Road
Wellesley, MA 02181**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Vice Chairman
Edward E. Madden
5 Arlington Street
Boston, MA 02116**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Executive V.P., Administration
John P. O'Reilly, Jr.
51 Ledgeways
Wellesley, MA 02181**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Treasurer & CFO
John F. Begley
6 Dundas Avenue
Andover, MA 01810**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Clerk
Lisa Menelly
525 Watertown Street
Newton, MA 02160**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John F. Begley* John F. Begley Treasurer & CFO
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

617-563-6343

Due Date: *SC-4-18-96*

CR2E034 (12/95)