

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002517

FILED
Mar 18, 2009
Secretary of State

Entity Name: JOHN HANCOCK DISTRIBUTORS LLC

Current Principal Place of Business:

200 BLOOR STREET EAST
TORONTO, ONTARIO M4W1E5, ON M4W 1E5 OC

New Principal Place of Business:

200 BLOOR STREET EAST
TORONTO, ONTARIO M4W1E5, ON M4W 1E5 CA

Current Mailing Address:

200 BLOOR STREET EAST
TORONTO, ONTARIO M4W1E5, ON M4W 1E5 OC

New Mailing Address:

FEI Number: 16-1611843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WALKER, CHRISTOPHER
Address: 200 BLOOR STREET EAST
City-St-Zip: TORONTO, ONTARIO M4W 1E5, ON M4W1E5 CA

Title: MGR () Delete
Name: FINCH, STEVE
Address: 197 CLARENDON STREET
City-St-Zip: BOSTON, MA 02116 US

Title: MGR () Delete
Name: EN, EDWARD
Address: 200 BLOOR STREET EAST
City-St-Zip: TORONTO, ONTARIO M4W 1E5, ON M4W 1E5 CA

Title: MGR () Delete
Name: PATTERSON, LYNNE
Address: 197 CLARENDON STREET
City-St-Zip: BOSTON, MA 02116 US

Title: MGR () Delete
Name: THOMPSON, WARREN
Address: 197 CLARENDON STREET
City-St-Zip: BOSTON, MA 02116 US

Title: MGR () Delete
Name: WALSH, KAREN
Address: 601 CONGRESS STREET
City-St-Zip: BOSTON, MA 02210 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: PATTERSON, LYNNE
Address: 601 CONGRESS STREET
City-St-Zip: BOSTON, MA 02110 US

Title: MGR (X) Change () Addition
Name: EVANS, BARRY
Address: 101 HUNTINGTON STREET
City-St-Zip: BOSTON, MA 02199 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHRISTOPHER WALKER

MGR

03/18/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date