2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #M02000001785

Principal Place of Business

1. Entity Name
FIDELITY EMPLOYER SERVICES COMPANY LLC



Mailing Address **82 DEVONSHIRE STREET 82 DEVONSHIRE STREET** BOSTON, NA 02109 BOSTON, MA 02109

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DIVISION OF CORPORATIONS ALLAHASSEE, FLORIDA



2. Principal Place of Business 3. Mailing Address 82 Devonshire S			Stre	treet					
Suite, Apt. #, etc.		Suite, Apt. #, etc. F7B	4			CHECK HERE IF MAKING CHANGES			
City & Stat	de	S City & State Boston, MA			4.	FEI Number 04-3523437	· ·	 	oplied For of Applicable
Zip	Country	Zip Cour 02109 US			5. Certificate of Status Desired			_ \$5.00 Additional	
	6. Name and Address of Curren			7. Name and Address of New Registered Agent					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			į	Name Street Address (P.O. Box Number is Not Acceptable)					
				City FL Zip Code					
	named entity submits this statement to tions of registered agent.	or the purpose of changing Its	registere	d office or	registered a	agent, or both, in the State of Flor	ida. I am fami	lar with,	and accept
SIGNATURE .	Signature, typed or primed name of registered agen	u med side if medicalde ANOVE	Bouteon	A Mathimatic	e required when	A solinet soline 1	DATE		
		FILE NO Make Check Payabl)WIII e to Flo			\$000169 rs::::::::::::::::::::::::::::::::::::		15 (50,0)	0
<u>-</u>	141111111111111111111111111111111111111								
9.	MANAGING MEMB		10.		A = = d =	ADDITIONS/C			53 4 100
NAME STREET ADDRESS CITY-ST-ZIP	MGR JONAS, STEPHEN P 82 DEVONSHIRE STREET BOSTON, MA 02109	☐ Delete	8		Jay F 82 De	tant Secretary reedman vonshire Street	U	Change	Addition
TITLE NAME	MGR RICHER, CLARE S 82 DEVONSHIRE STREET BOSTON, MA 02109	☐ Delete	PITLE NAME STREE		Assis Susan 82 De	tant Secretary Sturdy vonshire Street n, MA 02109		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-2IP	MGR SMAIL, PETER J 82 DEVONSHIRE STREET BOSTON, MA 02109	☐ Defete			Secre Pamel 82 De			Change	Addition A
TITLE NAME ATREET ADDRESS CITY-ST-ZIP		☐ Delete	8		-			Change	☐ Addition
ITLE - NAME STREET ADDRESS CITY-ST-21P		☐ Delete	192	ET ADDHESS ST-ZIP				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	8			į.		Change	☐ Addition

11. I hereby certify that the information supplied with this filling 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 is true and accurate and that my 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 508, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Susan Sturdy, Assistant Secretary

April 10, 2003

Daytime Phone #

CT CORPORATION

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CORPORATION(S) NAME		31V. 30N OF CORRES				
		OIVILION OF CORPORATIONS ALLAHASSEE, FLORIDA				
Fidelity Employer Services C	Company LLC					
\						
						
						
() Profit	() Amendment	() Merger				
() Nonprofit	() Dissolution (With drawn)	() Monte				
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark				
(-)-Limited Partnership	(X) Annual Report	() Other				
(X).LLC	() Name Registration	() Change of RA				
	() Fictitious Name	() UCC				
() Certified Copy	() Photocopies	() CUS				
() Call When Ready	() Call If Problem	() After 4:30				
(x) Walk In	() Will Wait	(x) Pick Up				
() Mail Out						
Name	4/21/03	Order#: 5834536 SO				
Availability	4/21/03	Older#. 3634336 SO				
Document						
Examiner	AAM	Ref#:				
Updater						
Verifier	Vanne	***************************************				
W.P. Verifier	240ITA)เหา - โปยเกลา	ABSSVANTIVI.S				
	ELVIS &	150 E - 150 200				

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GELVED

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615