

2001 UNIFORM BUSINESS REPORT (UBR)

0440476

DOCUMENT # P10780

1. Entity Name

FIDELITY INVESTMENTS INSTITUTIONAL SERVICES COMP

FILED

01 APR -3 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

82 DEVONSHIRE ST.
MAILZONE F7D
BOSTON MA 02109
US

Mailing Address

82 DEVONSHIRE ST.
MAILZONE F7D
BOSTON MA 02109
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-2882358

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
KELLY, KEVIN J
82 DEVONSHIRE STREET
BOSTON MA 02109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Gail McGovern
82 Devonshire Street, Boston, MA 02109 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KELLY, KEVIN J
82 DEVONSHIRE ST.
BOSTON MA 02109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Ellyn McColgan
82 Devonshire Street, Boston, MA 02109 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
FREEDMAN, JAY
82 DEVONSHIRE ST.
BOSTON MA 02109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Peter J. Smail
82 Devonshire Street, Boston, MA 02109 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
TIBBETTS, STEVEN E
82 DEVONSHIRE ST.
BOSTON MA 02109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
800003993408--0
-04/12/01--01018--017
*****150.00 *****150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BURKHEAD, GARY J
82 DEVONSHIRE STREET
BOSTON MA 02109 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
REYNOLDS, ROBERT L
82 DEVONSHIRE STREET
BOSTON MA 02109 ☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jay Freedman, Secretary

3/14/01

(617) 563-8515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)