

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000003066

FILED
Mar 13, 2020
Secretary of State
6507270990CC

Entity Name: BOSTON PRIVATE BANK & TRUST COMPANY

Current Principal Place of Business:

TEN POST OFFICE SQUARE
BOSTON, MA 02109

Current Mailing Address:

TEN POST OFFICE SQUARE
BOSTON, MA 02109 US

FEI Number: 04-2942314

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Officer/Director Detail :

Title CEO, PRESIDENT, DIRECTOR
Name DEHELLIS, ANTHONY
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title TREASURER
Name ROSE, NICHOLAS
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title SECRETARY
Name COOPER, CHRISTOPHER A
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title CHAIRMAN
Name WATERS, STEPHEN M
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name BROWN, JAMES C
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name CHILDS, TORRANCE
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name KUENSTNER, DEBORAH F
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name LARSON, GLORIA C
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: COOPER, CHRISTOPHER A.

SECRETARY

03/13/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STEVENSON, KIMBERLY S
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name FURLONG, MARK F.
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name UBINAS, LUIS ANTONIO
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name SIMONS, PAUL M
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name GAVEN, STEVEN M
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name ZLATAKUS, LIZABETH H
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name GUYAUX, JOSEPH C.
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name BAIRD, ALLISON
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name MCCUNE, JOY
Address TEN POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109