

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000003775

**Entity Name:** T. ROWE PRICE INVESTMENT SERVICES, INC.

**Current Principal Place of Business:**

100 E. PRATT ST.  
BALTIMORE, MD 21202-1009

**Current Mailing Address:**

100 E. PRATT ST.  
ATTN: CFA. OM1400  
BALTIMORE, MD 21202-1009 US

**FEI Number:** 52-1184650

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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 DVS  
Name OESTRECIHER, DAVID  
Address 100 E. PRATT ST.  
City-State-Zip: BALTIMORE MD 21202

Title AS  
Name FLISTER, JOAN E  
Address 100 E. PRATT ST.  
City-State-Zip: BALTIMORE MD

Title VT  
Name DIGNAN, TIMOTHY S  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202-1009

Title V  
Name BANKS, STEVEN J  
Address 100 E. PRATT ST.  
City-State-Zip: BALTIMORE MD 21202

Title DIRECTOR, CHAIRMAN  
Name BERNARD, EDWARD C  
Address 100 E. PRATT ST.  
City-State-Zip: BALTIMORE MD 21202

Title DIRECTOR, PRESIDENT  
Name DAVID, SCOTT B  
Address 100 E. PRATT STREET  
City-State-Zip: BALTIMORE MD 21202

Title ASSISTANT SECRETARY  
Name REILLY, KATHRYN L  
Address 100 EAST PRATT STREET  
City-State-Zip: BALTIMORE MD 21202

*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:** KATHRYN REILLY

**ASSISTANT SECRETARY** 04/09/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date