



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000114016		2. Exact name of the limited liability company Fidelity Brokerage Services LLC			
3. State of Formation Delaware		4. Brief description of the character of business conducted in Rhode Island Broker/dealer			
5. Principal office address 82 Devonshire St.		City Boston	State MA	Zip 02109	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Peter D. Stahl		Contact Title Assistant Secretary			
Street Address 82 Devonshire St., F7B		City Boston	State MA	Zip 02109	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - <b>DO NOT LIST MEMBERS</b> ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name James C. Burton		Manager Name Jeffrey Lagarce			
Street Address 82 Devonshire St.		Street Address 82 Devonshire St.			
City Boston	State MA	Zip 02109	City Boston	State MA	Zip 02109
Manager Name Michael Durbin		Manager Name Kathleen Murphy			
Street Address 82 Devonshire St.		Street Address 82 Devonshire St.			
City Boston	State MA	Zip 02109	City Boston	State MA	Zip 02109
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*Peter D. Stahl* 03/12/2013  
Signature of Authorized Person Date

Peter D. Stahl, Assistant Secretary  
Print or Type Name of Authorized Person

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SECRETARY OF STATE  
CORPORATIONS DIV

Form No. 632  
Revised: 01/2012

Printed on 100% Recycled Paper with Soy-Based Ink

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MAR 13 2013

BY *CR* 192476

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