

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007108

FILED
Apr 26, 2012
Secretary of State

Entity Name: MFS FUND DISTRIBUTORS, INC.

Current Principal Place of Business:

500 BOYLSTON STREET
BOSTON, MA 02116

New Principal Place of Business:

Current Mailing Address:

500 BOYLSTON STREET
BOSTON, MA 02116

New Mailing Address:

FEI Number: 04-3169826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION
1200 SOUTH PINE ISLND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: JESSEE, JAMES A
Address: 500 BOYLSTON STREET
City-St-Zip: BOSTON, MA 02116

Title: D
Name: MANNING, ROBERT J
Address: 500 BOYLSTON STREET
City-St-Zip: BOSTON, MA 02116

Title: S
Name: POLEBAUM, MARK N
Address: 500 BOYLSTON STREET
City-St-Zip: BOSTON, MA 02116

Title: T
Name: PETIPAS, ELIZABETH
Address: 500 BOYLSTON STREET
City-St-Zip: BOSTON, MA 02116

Title: AS
Name: FINEGOLD, DANIEL W
Address: 500 BOYLSTON STREET
City-St-Zip: BOSTON, MA 02116

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: DANIEL W. FINEGOLD

AS

04/26/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date