FILED 2008 FOR PROFIT CORPORATION Apr 04, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT #807189** 1. Entity Name 04-04-2008 90010 008 ***150.00 CITIFINANCIAL, INC. Principal Place of Business Mailing Address 40000--300 ST PAUL PLACE 300 ST PAUL PLACE BALTIMORE, MD 21202 BSP17D - LEGAL DEPT BALTIMORE, MD 21202 US CR2E034 (11/05) 02282008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-0278518 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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. I am familiar with, and accept SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS AS TITLE CANEDY, K.A. NAME STREET ADDRESS 300 ST. PAUL PLACE BALTIMORE, MD 21202 CITY-ST-ZIP DAVIS, LINDA S STREET ADDRESS 300 ST. PAUL PLACE BALTIMORE, MD 21202 CITY-ST-ZIP VD TITLE MURPHY, J. P. NAME 300 ST. PAUL PLACE STREET ADDRESS DO NOT WRITE BALTIMORE, MD 21202 CITY-ST-ZIP IN THIS SPACE TITLE PD SCHNEIDER, JAMES J NAME 300 ST PAUL PLACE STREET ADDRESS CITY-ST-ZIP BALTIMORE, MD 21202 NAME SCHNIEDER, EDWARD J STREET ADDRESS 300 ST PAUL PLACE CITY-ST-ZIP BALTIMORE, MD 21202

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

TITLE

STREET ADDRESS CITY-ST-ZIP

C. C. CASELLY K. H. CAVED

3/28/08 410-331