

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 822819

FILED
Apr 28, 2008
Secretary of State

Entity Name: CITICAPITAL COMMERCIAL CORPORATION

Current Principal Place of Business:

250 E. CARPENTER FWY
IRVING, TX 75062 US

New Principal Place of Business:

3950 REGENT
IRVING, TX 75063 US

Current Mailing Address:

P.O. BOX 31226
TAMPA, FL 336313226 US

New Mailing Address:

P.O. BOX 30509
TAMPA, FL 336313226 US

FEI Number: 35-1158885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: AVP () Delete
Name: HOFFMAN, LISA
Address: 3800 CITIGROUND CENTER DR
City-St-Zip: TAMPA, FL 33610

Title: V () Delete
Name: STONE, DONNA
Address: 250 E. CARPENTER FWY
City-St-Zip: IRVING, TX 75062

Title: T () Delete
Name: NEMETH, MICHAEL
Address: 450 MAMARONOCK AVE
City-St-Zip: HARRISON, NY 10528

Title: PD () Delete
Name: ALEMANY, ELLEN
Address: 399 PARKAVE
City-St-Zip: NEW YORK, NY 10022

Title: AVP (X) Delete
Name: BRAVENDER, LISA
Address: 250 E CARPENTER FREEWAY
City-St-Zip: IRVING, TX 75062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AS (X) Change () Addition
Name: HOFFMAN, LISA
Address: 3800 CITIGROUP CENTER DR
City-St-Zip: TAMPA, FL 33610

Title: VPS (X) Change () Addition
Name: JOVAN, ROBERT
Address: 3950 REGENT
City-St-Zip: IRVING, TX 75063

Title: T (X) Change () Addition
Name: CRAIG, ANDREW
Address: 787 7TH AVE
City-St-Zip: NEW YORK, NY 10019

Title: PDIR (X) Change () Addition
Name: COOK, ROBERT
Address: 3950 REGENT
City-St-Zip: IRVING, TX 75063

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LISA HOFFMAN

AS

04/28/2008

Electronic Signature of Signing Officer or Director

Date