2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2008 8:00 am Secretary of State

| DOCUMENT # 841298 1. Entity Name CITICORP NORTH AMERICA, INC. | | | | | | | | 04-23-200 | 8 90040 | 030 ***150 |).00 |
|---|--|---|--|---|---|--|---|---|---------------|----------------------|---------------------------|
| Principal Place | e of Business | | Mailing Address | | | | | | | | |
| 399 PARK AVE | | | PO BOX 31226 | | | | | | | | |
| NEW YORK, NY 10043 | | | TAMPA, FL 33634-32 | 26 US | | | | | | | |
| | | | | | | | | | | | |
| 2. Principal P | lace of Business - | No P.O. Box # | 3. Mailing Address 30509 | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 0.4000000 | Cha D | CD2E | -024 (42(DE) | |
| | | | | | | | 04092008 | Chg-P | CRZE | 034 (12/06) | |
| City & State | | | City & State | | | | 4. FEI Numb 13-293 | | | | plied For t Applicable |
| Zip | Co | ountry | Zi9-21 -2) | Count | ን / / | | | of Status Desired | | \$8.75 Add | litional |
| | | | 35051 | $\perp \mathcal{U}_{+}$ | <u> </u> | | | | | Fee Require | d |
| | 6. Name and | Address of Current | 7. Name and Address of New Registered Agent Name | | | | | | | | |
| C T CORPORATION SYSTEM | | | | | | | | | | | |
| 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | | | | | | | |
| | | | | | City | | | | F | L Zip Code | э |
| The above named entity submits this statement for the purpose of changing its registere | | | | | | registere | ed agent, or bo | th, in the State of | Florida. I ar | n familiar with, | and accept |
| the obligat | ions of registered | agent. | N.ET. | | | | | | | | |
| SIGNATURE. | Supporture transfer count | led name of registered agent | and title if analizable (NOT | E. Bonisteron | 1 Acont signatur | va required | when reinstating) | | DATE | | |
| | Signature, typeo or print | iod havie or registered again. | Indulie ii appicacie. (Inc.) | C. INDUISION | - Agent signatur | i e rodoxeo | WHOT COMESSAINS | Ι | DATE | | |
| FIL After Ma | E NOW!!! FEE | E IS \$150,00 e will be \$550.0 | 9. Election Campa Trust Fund Cont | | cing | \$5. 6 Adde | 00 May Be ed to Fees | | | | |
| 10. | | OFFICERS AND | | 11. | , | | | CHANGES TO C | FFICERS AN | | |
| TITLE NAME | CD RICHARDS, G | EUEEDEA & | Delete | TITLE NAME | | PYC | ident | nkman | | ☐ Change | Addition |
| STREET ADDRESS | 388 GREENW | | | | ET ADDRESS | 11 KU 380 | Arcen | wich St | _ | | |
| CITY-ST-ZIP | NEW YORK, N | Y 10013 | | CITY- | ST-ZIP | 7991 | MINN | NY 100 | 213 | | |
| TITLE | S | | | | | | ν | | | | |
| NAME STREET ADDRESS | COHEN, KENI | | Delete | TITLE | 1 | 1 4 120 | ~ YUI ~ | * | | ☐ Change | Addition |
| | 425 PARK AVE | | ∟J Delete | NAME | . | 19125 | ~ YUI K | | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP | 425 PARK AVE NEW YORK, N | E 2ND FLOOR | ☐ Delete | NAME STREE | 1 | 74120 | o yur k | | | ☐ Change | ☐ Addition |
| 1 | | E 2ND FLOOR | □ Delete | NAME STREE | ET ADDRESS - ST-ZIP | 7180 | OUTEN | | | ☐ Change | ☐ Addition |
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