## 2006 FOR PROFIT CORPORATION

## Mar 22, 2006 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT #853960** 03-22-2006 90222 001 \*\*\*\*50.00 03-22-2006 90222 002 \*\*\*100.00 CITIFINANCIAL SERVICES, INC. (GA) Principal Place of Business Mailing Address 300 ST. PAUL PLACE 300 ST. PAUL PLACE 66006504 BALTIMORE, MD 21202 BSP10D BALTIMORE, MD 21202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 01302006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 52-0572791 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 мау Ве After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. preider trehange TITLE Delete Delete TITLE ☐ Addition PETRECCO, FRANK J NAME NAME STREET ADDRESS 300 ST. PAVE PLACE STREET ADDRESS BALTIMORE, MD 21202 CITY-ST-ZIP CITY-SI-7IP TITLE Delete TITLE ☐ Addition PANCHANADESWARAN, B NAME STREET ADDRESS 300 ST. PAUL PLACE STREET ADDRESS BALTIMORE, MD 21202 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition JONES, J.I. NAME NAME 300 ST. PAUL PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BALTIMORE MD., CITY-ST-ZIP ☐ Delete Change ☐ Addition DAVIS, LINDAS. NAME PARIS, LINDA S NAME STREET ADDRESS 300 ST. PAUL PLACE STREET ADDRESS CITY-ST-ZIP BALTIMORE, MD 21202 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CANEDY, K.A. NAME NAME STREET ADDRESS 300 ST. PAUL PLACE STREET ADDRESS BALTIMORE MD., CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition

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

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTO

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED