

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003966

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: CITI FUND SERVICES OHIO, INC.

## Current Principal Place of Business:

STE 1000, 3435 STELZER ROAD  
COLUMBUS, OH 43219

## New Principal Place of Business:

3435 STELZER ROAD  
COLUMBUS, OH 43219

## Current Mailing Address:

P.O. BOX 30509  
TAMPA, FL 33631

## New Mailing Address:

P.O. BOX 30509  
TAX & REPORTING  
TAMPA, FL 33631 US

FEI Number: 31-1249295

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: P ( ) Delete  
Name: NADDAF, FRED  
Address: 3435 STELZER RD  
City-St-Zip: COLUMBUS, OH 43219

Title: VP ( ) Delete  
Name: IYER, CHANDRESH  
Address: 388 GREENWICH ST  
City-St-Zip: NEW YORK, NY 10013

Title: S ( ) Delete  
Name: LAWLESS, JOHN  
Address: 105 EISENHOWER PARKWAY  
City-St-Zip: ROSELAND, NJ 07068

Title: T ( ) Delete  
Name: MONTIETH, CAMERINE  
Address: 2 PORTLAND SQUARE  
City-St-Zip: PORTLAND, ME 04101

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NADDAFF, FRED J  
Address: 3435 STELZER RD  
City-St-Zip: COLUMBUS, OH 43219

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

Title: S (X) Change ( ) Addition  
Name: LUKENS, DANA  
Address: 77 INDUSTRIAL PARK ROAD  
City-St-Zip: SACO, ME 04072

Title: T (X) Change ( ) Addition  
Name: MONTEITH, CATHERINE  
Address: 77 INDUSTRIAL PARK ROAD  
City-St-Zip: SACO, ME 04072

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

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

VP

04/09/2009

Electronic Signature of Signing Officer or Director

Date