

2003 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State

04-04-2008 90010 038 ***150.00

DOCUMENT # F04000000932

1. Entity Name
CITIFINANCIAL, INC. (OH)



Principal Place of Business
300 ST PAUL PLACE
BALTIMORE, MD 21202

Mailing Address
300 ST PAUL PLACE
BSP17D-LEGAL DEPT.
BALTIMORE, MD 21202

40000401



DO NOT WRITE IN THIS SPACE

02282008 No Chg-P CR2E034 (11/05)

4. FEI Number
31-0890161

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SCHNEIDER, JAMES W 300 ST PAUL PLACE BALTIMORE, MD 21202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MURPHY, JAMES P 300 ST PAUL PLACE BALTIMORE, MD 21202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASAT CANEDY, K.A. 300 ST. PAUL PLACE BALTIMORE, MD 21202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SCHNEIDER, EDWARD J 300 ST. PAUL PLACE BALTIMORE, MD 21202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DAVIS, LINDA S 300 ST PAUL PLACE BALTIMORE, MD 21202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BAER, TERESA M 300 ST PAUL PLACE BALTIMORE, MD 21202

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IN THIS SPACE**

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: K.A. Canedy K.A. CANEDY 3/28/08 410-332-3067
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #