2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # F04000000933

CITIFINANCIAL, INC. (TX)



Principal Place of Business

300 ST. PAUL PLACE BALTIMORE, MD 21202 Mailing Address

300 ST. PAUL PLACE **BSPITD-LEGAL DEPT** BALTIMORE, MD 21202

FILED Apr 16, 2007 08:00 A Secretary of State



03302007 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (11/05)

4. FEI Number 75-2855422

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

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The above named entity submits this statement for the the obligations of registered agent.	purpose of cha	anging its registered office of	or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept ,
SIGNATURE Signature, typed or printed name of registered agent and title	e if applicable	(NOTE Registered Agent signs	ature required when reinstating)	DATE
	9. Election	n Campaign Financing	\$5.00 May Be	U00000706816

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

Trust Fund Contribution.

Added to Fees

04/24/07-80050-005 150.00

10.	OFFICERS AND DIRECTORS
TITLE NAME * STREET ADDRESS CITY-ST-ZIP	PD . 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	TD SCHNEIDER, EDWARD J 300 ST. PAUL PLACE BALTIMORE, MD 21202
TITLE NAME STREET ADDRESS CITY+ST-ZIP	VPS 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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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

SIGNATURE:

GNING OFFICER OR DIRECTOR