2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # M02000000658

1. Entity Name

CITIFINANCIAL CORPORATION, LLC



Principal Place of Business

300 ST. PAUL PLACE BALTIMORE, MD 21202 Mailing Address

300 ST. PAUL PLACE BALTIMORE, MD 21202

FILED Mar 29, 2005 8:00 am Secretary of State

03-29-2005 90118 032 ****50.00



03142005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number		Applied For
33-0995851		Not Applicable
5. Certificate of Status Desired		O Additional

6. Name and Address of Current Registered Agent

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

SIGNATURE: >

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the obligat	named entity submits this statement for the purpose of char ions of registered agent.	nging its registere	ed office or registered agent, or both, in the Sta	ate of Florida. I am familiar with, and a	accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.		(NQTE: Registered	Agent signature required when reinstating)	DATE	-
	iling Fee is \$50.00 ue by May 1, 2005				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM CITIFINANCIAL, INC. 300 ST. PAUL PLACE BALTIMORE, MD 21202				,·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby of indicated limited lia	certify that the information supplied with this filling does not q on this report is true and accurate and that my signature sh bility company or the receiver or trustee empowered to exec	qualify for the exer all have the same cute this report as	mption stated in Section 119.07(3)(i), Florida S r legal effect as if made under oath; that I am required by Chapter 608, Florida Statutes.	tatutes. I further certify that the inform a managing member or manager of t	ation he