2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29038

e: LITCHEIELD EINANCIAL CORPOR

FILED Apr 14, 2004 Secretary of State

Entity Na	me: LITCHFIE	ELD FINANCIAL CORPORATION	ON			
Current Principal Place of Business:			New Pr	New Principal Place of Business:		
430 MAIN STREET WILLIAMSTOWN, MA 01267				C 84 STATE ST. N, MA 02109		
Current Mailing Address:			New Ma	New Mailing Address:		
	MINSTER ST. NCE, RI 02940)				
FEI Number	: 04-3023928	FEI Number Applied For()	FEI Number Not A	applicable () Certificate of Status Desired ()		
Name and	l Address of C	Current Registered Agent:	Name a	nd Address of New Registered Agent:		
1201 HAY	ATION SERVIC S STREET	CE COMPANY				
Y TALLAHAS	SSEE, FL 323	01 US				
	e named entity : e of Florida.	submits this statement for the p	ourpose of changir	ng its registered office or registered agent, or both,		
SIGNATUI	RE:					
	Electror	ic Signature of Registered Age	ent	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITI	ONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	EVP () RABIDOU, RON 430 MAIN STRI WILLIAMSTOW	EET	Title: Name: Address: City-St-Zi	AS (X) Change () Addition FURIA, MARYBETH 40 WESTMINSTER STREET p: PROVIDENCE, RI 02903		
Title: Name: Address: City-St-Zip:	DP () MITTERLING, F 333 EAST RIVE EAST HARTFO	R DRIVE	Title: Name: Address: City-St-Zi	() Change () Addition		
Title: Name: Address: City-St-Zip:	SVPT () LYNN, BRIAN 40 WESTMINIS PROVIDENCE,		Title: Name: Address: City-St-Zi	() Change () Addition		
Title: Name: Address: City-St-Zip:	DEVP () YEARWOOD, 2 40 WESTMINS PROVIDENCE,	TER STREET	Title: Name: Address: City-St-Zi	() Change () Addition		
Title: Name: Address: City-St-Zip:	SVP () SMITH, KATHL 40 WESTMINS PROVIDENCE,	TER ST	Title: Name: Address: City-St-Zi	AS (X) Change () Addition SMITH, KATHLEEN A 40 WESTMINSTER ST p: PROVIDENCE, RI 02903		
Title: Name: Address:	D () GREEN, PAUL 40 WESTMINS	Delete	Title: Name: Address:	SEC (X) Change () Addition GREEN, PAUL 40 WESTMINSTER STREET		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

PROVIDENCE, RI 02903

SIGNATURE: MARY BETH FURIA AC 04/14/2004

City-St-Zip:

PROVIDENCE, RI 02903

DEBRA A. RAYMOND, AS 40 WESTMINSTER STREET PROVIDENCE, RI 02903

RONALD H. MESSINGER, AS 333 EAST RIVER DR. E. HARTFORD, CT 06188

MARGARET R. HAYES-COTE, AS 40 WESTMINSTER STREET PROVIDENCE, RI 02903

MICHAEL A. SANDOVAL, VP 40 WESTMINSTER STREET PROVIDENCE, RI 02903

DONALD C. HENDERSON, SVP 40 WESTMINSTER STREET PROVIDENCE, RI 02903

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