

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 850322

**Entity Name:** CITICORP NATIONAL SERVICES, INC.**Current Principal Place of Business:**1000 TECHNOLOGY DRIVE  
O'FALLON, MO 63368**Current Mailing Address:**P.O. BOX 30509  
TAX & REPORTING  
TAMPA, FL 33631 US**FEI Number:** 43-6027004**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title CEO/D  
Name RENZI, ANTHONY  
Address 1000 TECHNOLOGY DR  
City-State-Zip: O'FALLON MO 63368

Title TREASURER, CFO  
Name LOWE, ROBIN N  
Address 1000 TECHNOLOGY DRIVE  
City-State-Zip: O'FALLON MO 63368

Title VP/S  
Name BOYHER, JEFFERY L  
Address 1000 TECHNOLOGY DRIVE  
City-State-Zip: O' FALLON MO 63368

Title P  
Name FLYNN, WAYNE E  
Address 1000 TECHNOLOGY DRIVE  
City-State-Zip: O'FALLON MO 63368

Title VP  
Name HOFFMAN, LISA A  
Address 3800 CITIGROUP CENTER DRIVE  
City-State-Zip: TAMPA FL 33610

*I hereby 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 all other like empowered.*

**SIGNATURE:** LISA A HOFFMAN

VICE PRESIDENT

04/16/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date