## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000004927

**Entity Name: CITISHARE CORPORATION** 

**Current Principal Place of Business:** 

388 GREENWICH STREET NEW YORK, NY 10013

**Current Mailing Address:** 

PO BOX 30509 TAX AND REPORTING TAMPA FL 33630 US

FEI Number: 13-2982159 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH 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

FILED Mar 20, 2023

**Secretary of State** 

1877165412CC

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR, CHAIRMAN Name GARZA, ELIZABETH Name GOPALAKRISHNAN, MANOJ Address 388 GREENWICH STREET Address 388 GREENWICH STREET City-State-Zip: NEW YORK NY 10013 City-State-Zip: NEW YORK NY 10013

Title TREASURER Title CFO

Name ROSIER, ALCINDOR Name PALLA, STEVEN

Address 2 COURT SQUARE Address 6400 LAS COLINAS BLVD

City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: IRVING TX 75039

Title SECRETARY Title ASSISTANT TAX OFFICER

Name SCRUTON, MICHELE Name SCHMIDT, JULIE

Address 388 GREENWICH STEET Address 3800 CITIGROUP CENTER DRIVE

City-State-Zip: NEW YORK NY 10013 City-State-Zip: TAMPA FL 33610

Title PRESIDENT, CEO Title DIRECTOR

Name DOUGHERTY, TIMOTHY Name PUSANIK, ROBERT

Address 388 GREENWICH STREET Address 3800 CITIGROUP CENTER DRIVE

City-State-Zip: NEW YORK NY 10013 City-State-Zip: TAMPA FL 33610

Continues on page 2

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: JULIE SCHMIDT

ASSISTANT TAX OFFICER 03/20/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name KRAPCHO, DOUGLAS Name CROWLEY , RYAN

Address 2859 PACES FERRY RD Address 4400 EASTON COMMONS City-State-Zip: ATLANTA GA 30339 City-State-Zip: COLUMBUS OH 43219