

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000596

Entity Name: CITIGROUP INC.**Current Principal Place of Business:**388 GREENWICH ST
NEW YORK, NY 10013**Current Mailing Address:**PO BOX 30509
TAX AND REPORTING
TAMPA, FL 33630 US**FEI Number:** 52-1568099**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**Officer/Director Detail :**

Title	DIRECTOR, CEO
Name	FRASER, JANE
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

Title	TREASURER
Name	VERDESCHI, MICHAEL
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

Title	SECRETARY, GENERAL COUNSEL
Name	MCINTOSH, BRENT
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

Title	ASSISTANT TAX OFFICER
Name	SCHMIDT, JULIE
Address	8800 HIDDEN RIVER PKWY
City-State-Zip:	TAMPA FL 33637

Title	DIRECTOR
Name	WRIGHT, DEBORAH C
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

Title	DIRECTOR
Name	TAYLOR, DIANA
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

Title	DIRECTOR
Name	HENNES, DUNCAN
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

Title	DIRECTOR
Name	COSTELLO, ELLEN
Address	388 GREENWICH ST
City-State-Zip:	NEW YORK NY 10013

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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** 04/21/2022_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PONCE DE LEON, ERNESTO ZEDILLO
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name TURLEY, JAMES
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name HENRY, PETER
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name IRELAND, SUSAN
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title CFO
Name MASON, MARK
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name DAILEY, GRACE
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name REINER, GARY
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR, CHAIRMAN
Name DUGAN, JOHN
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name JAMES, RENEE
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name JACOBS, LEW WALLACE IV
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name DESOER, BARBARA
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013