Sta						
RAL	ate of Rhode Island and Pro Office of the Secret		Fee: \$50.00			
secretary of State	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-2040					
Foreign Business Cor Annual Report Filing Period: January 1 - Mai						
	7-1.2-1501(e), each corporation fail ) days after the time prescribed by fee of \$25.00.					
ANNUAL REPORT YEAR: 2013						
1. Corporate ID No. 000114814						
2. Name of Corporation <u>CIT Bank</u>						
3. Street Address Principal Business Office:						
No. and Street: 2180 SO	UTH 1300 EAST, SUITE 250					
	<u>AKE CITY</u>	State: <u>UT</u> Zip: <u>84106</u>	Country: <u>USA</u>			
City or Town: <u>SALT LA</u> 4. Business Phone No. 5. State of Incorporation		State: <u>UT</u> Zip: <u>84106</u>	Country: <u>USA</u>			
City or Town: <u>SALT LA</u> 4. Business Phone No. 5. State of Incorporation State: <u>UT</u>	<u>AKE CITY</u>		Country: <u>USA</u>			
City or Town: SALT LA 4. Business Phone No. 5. State of Incorporation State: UT 6. Brief Description of the FINANCIAL SERVICES	AKE CITY Character of Business Conducto of the Officers and Directors:		Country: <u>USA</u>			
City or Town: SALT LA 4. Business Phone No. 5. State of Incorporation State: UT 6. Brief Description of the FINANCIAL SERVICES 7. Names and Addresses of	AKE CITY Character of Business Conducto of the Officers and Directors:		Country: <u>USA</u>			
City or Town: SALT LA 4. Business Phone No. 5. State of Incorporation State: UT 6. Brief Description of the FINANCIAL SERVICES 7. Names and Addresses of All officers and director	AKE CITY Character of Business Conducto of the Officers and Directors: s must be listed.	ed in Rhode Island Address Address, City or Town, State, Zi 2180 SOUTH 1300 EA	p Code, Country ST, STE 250			
City or Town: SALT LA 4. Business Phone No. 5. State of Incorporation State: UT 6. Brief Description of the FINANCIAL SERVICES 7. Names and Addresses of All officers and director Title	AKE CITY         AKE CITY         Character of Business Conductor         Of the Officers and Directors:         s must be listed.         Individual Name         First, Middle, Last, Suffix	ed in Rhode Island Address Address, City or Town, State, Zi 2180 SOUTH 1300 EA SALT LAKE CITY, UT 84 1 CIT DRIV	p Code, Country ST, STE 250 106 USA E			
City or Town: SALT LA 4. Business Phone No. 5. State of Incorporation State: UT 6. Brief Description of the FINANCIAL SERVICES 7. Names and Addresses of All officers and director CFO CFO	AKE CITY         AKE CITY         Character of Business Conducts         of the Officers and Directors:         s must be listed.         Individual Name         First, Middle, Last, Suffix         DARREN BERRY	ed in Rhode Island Address Address, City or Town, State, Zi 2180 SOUTH 1300 EA SALT LAKE CITY, UT 84	p Code, Country ST, STE 250 106 USA E 19 USA ST, STE. 250			

8. Shares Authorized and Issued							
Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>			
CWP		\$10.0000	5,000,000.00	500000			
CWP       \$10.0000       5,000,000.00       500000         9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.         Signed this 19 Day of March, 2013 at 12:15:28 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.         By       CHRISTOPHER H. PAUL         Signature of Authorized Representative of the Corporation         SECRETARY         Title         This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.							
Form No. 630 Revised 09/07							
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