

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 120417		2. Name of Corporation Credit Suisse Financial Corporation			
3. Street Address Principal Business Office 11 Madison Avenue, Corp Tax Dept		City New York	State NY	ZIP 10010	
4. Business Phone No. 212-325-2000		5. State of Incorporation Delaware			
6. Brief Description of the Character of Business Conducted in Rhode Island Residential Loan Origination					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name SUSAN F TOBIN		Vice President Name DOUGLAS ROSEMAN			
Street Address 11 MADISON AVENUE		Street Address 11 MADISON AVENUE			
City NEW YORK	State NY	ZIP 10010	City NEW YORK	State NY	ZIP 10010
Secretary Name MARIE F GAYO		Treasurer Name PETER J. FEENEY			
Street Address 302 CARNEGIE CTR, 2ND FLOOR		Street Address 11 MADISON AVENUE			
City PRINCETON	State NJ	ZIP 08540	City NEW YORK	State NY	ZIP 10010
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ANDREW KIMURA		Director Name PATRICK A REMMERT, JR			
Street Address 11 MADISON AVENUE		Street Address 11 MADISON AVENUE			
City NEW YORK	State NY	ZIP 10010	City NEW YORK	State NY	ZIP 10010
Director Name SUSAN F TOBIN		Director Name			
Street Address 11 MADISON AVENUE		Street Address			
City NEW YORK	State NY	ZIP 10010	City	State	ZIP
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐ 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000	COMMON	0.10	1,000	Common	0.10

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.

FILED

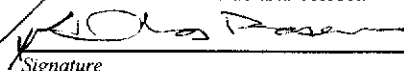
File Date
MAR 06 2008

Check No.
440699 KM

By

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.


Signature

01/25/2008
Date

DOUGLAS ROSEMAN

Print or Type Name

VICE PRESIDENT

Title