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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 2009

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. 000063993		2. Name of Corporation CITICORP USA, INC	
3. Street Address Principal Business Office 388 GREENWICH STREET		City NEW YORK	State NY
4. Business Phone No. 813-604-8112		5. State of Incorporation DELAWARE	
6. Brief Description of the Character of Business Conducted in Rhode Island COMMERCIAL LOAN SERVICING			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name JOSEPH MARTINELLI		Vice President Name LISA HOFFMAN	
Street Address 388 GREENWICH STREET		Street Address 3800 CITIGROUP CENTER DRIVE	
City NEW YORK	State NY	City TAMPA	State FL
Zip 10013		Zip 33610	
Secretary Name JOSEPH WOLLARD		Treasurer Name DENIS SCHREIBER	
Street Address 425 PARK AVE		Street Address 388 GREENWICH STREET	
City NEW YORK	State NY	City NEW YORK	State NY
Zip 10022		Zip 10013	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name KAREN KIRCHEN		Director Name JOSEPH MARTINELLI	
Street Address 388 GREENWICH STREET		Street Address 388 GREENWICH STREET	
City NEW YORK	State NY	City NEW YORK	State NY
Zip 10013		Zip 10013	
Director Name STEPHEN YOUNG		Director Name DEBORAH ADELMAN	
Street Address 390 GREENWICH STREET		Street Address 388 GREENWICH STREET	
City NEW YORK	State NY	City NEW YORK	State NY
Zip 10013		Zip 10013	
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
		Number of Shares	Class/Series
		1,000	COMMON
		Par Value	1.00

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.

File Date 2-18-09
Check No. 5113414689
By: MNC
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 Lisa A. Hoffman Date 2-17-09
Print or Type Name Lisa A. Hoffman
Title VP