



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

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2012

**1. ID No.** 000505214

**2. Exact Name of the Limited Liability Company** Citigroup Life Agency LLC

**3. State of Formation**

State: DE

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

INSURANCE AGENCY

**5. Principal Office Address**

No. and Street: 700 RED BROOK BLVD

City or Town: OWINGS MILLS State: MD Zip: 21117 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: ATTN: TAX & REPORTING Contact Title:

No. and Street: P.O. BOX 30509

City or Town: TAMPA State: FL Zip: 33631 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	JOHN E BAUMGARTNER	2 COURT SQUARE LONG ISLAND CITY, NY 11120 USA
MANAGER	TIMOTHY D. WILLIAMS	787 SEVENTH AVENUE NEW YORK, NY 10019 USA
MANAGER	DIANE E SHEVLIN	1 COURT SQUARE LONG ISLAND CITY, NY 11120 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 18 Day of September, 2012 at 2:00:47 PM by the authorized person.** *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By LISA A HOFFMAN  
Signature of Authorized Person

Form No. 632  
Revised 09/07

© 2007 - 2012 State of Rhode Island and Providence Plantations  
All Rights Reserved