



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040

AMENDED/REVISED



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 98

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 86169 2. Name of Corporation Citizens Financial Services Inc. (f/k/a Citizens Investment Securities, Inc.)  
3. Street Address Principal Business Office One Citizens Plaza City Providence State RI Zip 02903  
4. Business Phone No. (401) 456-7000 5. State of Incorporation RI 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
to act as a broker dealer in securities and other transactions

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name <u>Marcy R. Holowiak</u> Street Address <u>One Citizens Plaza</u> City <u>Providence</u> State <u>RI</u> Zip <u>02903</u>	Vice President Name <u>James Bumpus</u> Street Address <u>One Citizens Plaza</u> City <u>Providence</u> State <u>RI</u> Zip <u>02903</u>
Secretary Name <u>Maryellen Williams</u> Street Address <u>One Citizens Plaza</u> City <u>Providence</u> State <u>RI</u> Zip <u>02903</u>	Treasurer Name <u>Kent W. Gladding</u> Street Address <u>One Citizens Plaza</u> City <u>Providence</u> State <u>RI</u> Zip <u>02903</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name <u>Mark J. Formica</u> Street Address <u>One Citizens Plaza</u> City <u>Providence</u> State <u>RI</u> Zip <u>02903</u>	Director Name <u>Bradford B. Kopp</u> Street Address <u>One Citizens Plaza</u> City <u>Providence</u> State <u>RI</u> Zip <u>02903</u>
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
8,000	common	\$.01

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
100	common	\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date: 9/2/98

Check No.: N/C

By: [Signature]

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.

Maryellen Williams 9/2/98  
Signature of Officer Date

Maryellen Williams  
Print or Type Name of Officer

Secretary  
Title of Officer