

No. C 151505	Due no later than October 31, 2008		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form 1. Mailing Address - Correct in this box, if applicable CITICORP CREDIT SERVICES, INC. (USA) C/O LICENSING PO BOX 34226 TAMPA, FL 33631-3226		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE, ID 83702 USA
			3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u> / <u>Name</u> President Matthew Jenkins DIRECTOR WILLIAM DiPAULA Assistant Secretary/ Assistant Treasurer LISA HOFFMAN	<u>Street or P.O. Address</u> 14000 Citicard Way, Bldg A 14050 Citicard Way, Jacksonville Bldg A 3800 Citigroup Center, Tampa	<u>City</u> <u>State</u> <u>Zip</u> Jacksonville FL 32258 FL 32258 FL 33610	
5. Organized Under the Laws of: DELAWARE C 151505	6. Signature  Name (Typed or Printed) Lisa A. Hoffman	Date 10-2-08 Title Asst Secretary	

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Do Not Tape or Staple

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Fold, seal and mail this portion.

TC

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