

1.) CORPORATION NAME:

CITICORP DEL-LEASE, INC.

DUE DATE: **8/31/2011**

SCC ID NO: **F0568644**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 450 MAMARONECK AVE

CITY/ST/ZIP: HARRISON, NY 10528-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JOHN A MCKENNA
TITLE: PRESIDENT
ADDRESS: 750 WASHINGTON BLVD
CITY/ST/ZIP/CO: STAMFORD, CT 06901-

OFFICER

DIRECTOR

NAME: LISA A HOFFMAN
TITLE: VICE PRESIDENT
ADDRESS: 3800 CITIGROUP CENTER DR
CITY/ST/ZIP/CO: TAMPA, FL 33610-

OFFICER

DIRECTOR

NAME: EUGENE D LYLES, JR
TITLE: S/SVP
ADDRESS: 1005 WEST WILLA MARIA
CITY/ST/ZIP/CO: BRYAN, TX 77801-

OFFICER

DIRECTOR

NAME: JAMES E JENKINS JR
TITLE: TREASURER
ADDRESS: 3950 REGENT BLVD
CITY/ST/ZIP/CO: IRVING, TX 75063-

OFFICER

DIRECTOR

NAME: THOMAS GRIECO
TITLE: EVP
ADDRESS: 750 WASHINGTON BLVD
CITY/ST/ZIP/CO: STAMFORD, CT 06901-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ LISA A HOFFMAN</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>LISA A HOFFMAN, VICE PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>9/28/2011</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.