## SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

SCHEDULE 13G

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT
TO RULES 13d-1(b),(c), AND (d) AND AMENDMENTS THERETO FILED
PURSUANT TO RULE 13d-2
(AMENDMENT NO. 1)\*

(AMENDMENT NO. 1)*				
Citi Trends, Inc.				
(Name of Issuer)				
Common Stock, \$0.01 Par Value Per Share				
(Title of Class of Securities)				
17306X102				
(CUSIP Number)				
12/31/2007				
(Date of Event Which Requires Filing of this Statement)				
Check the appropriate box to designate the rule pursuant to which this Schedule is filed:  /X/ Rule 13d-1(b)				
/ / Rule 13d-1(c) / / Rule 13d-1(d)				
*The remainder of this cover page shall be filled out for a reporting person'sinitial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.				
The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).				
Page 1 of 4 Pages				
rage 1 or rrages				
CUSIP NO. 17306X102 13G PAGE 2 OF 4 PAGES  1 NAME OF REPORTING PERSONS				
Massachusetts Financial Services Company ("MFS")				
CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  (SEE INSTRUCTIONS)				
(a) / / (b) / / Not Applicable				
3 SEC USE ONLY				
4 OTTTTENOUTD OD DI 405 OF ODS.************************************				
4 CITIZENSHIP OR PLACE OF ORGANIZATION				
Delaware				

SHARES 1,796,580 shares of common stock

NUMBER OF 5 SOLE VOTING POWER

	BENEFICIALL	_Y		
	OWNED E	3Y	6	SHARED VOTING POWER
	EAC	СН		None
	REPORTIN	NG	7	SOLE DISPOSITIVE POWER
	PERSO	ON		1,796,580 shares of common stock
	WIT	ГН		
			8	SHARED DISPOSITIVE POWER
				None
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  1,796,580 shares of common stock, consisting of shares beneficially owned by MFS and/or certain other non-reporting entities.  CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS)//  Not Applicable			
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9			
12	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)  IA			

SCHEDULE 13G PAGE 3 OF 4 PAGES

ITEM 1: (a) NAME OF ISSUER:

SEE COVER PAGE

(b) ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICES:

102 Fahm Street Savannah, Georgia 31401

ITEM 2: (a) NAME OF PERSON FILING:

See item 1 on page 2

(b) ADDRESS OF PRINCIPAL BUSINESS OFFICE OR, IF NONE, RESIDENCE:

500 Boylston Street Boston, MA 02116

(c) CITIZENSHIP:

See Item 4 on page 2

(d) TITLE OF CLASS OF SECURITIES:

See Cover Page

(e) CUSIP NUMBER:

See Cover Page

ITEM 3: The person filing is an investment adviser in accordance with Rule 13d-1(b)(1)(ii)(E)

ITEM 4: OWNERSHIP:

(a) AMOUNT BENEFICIALLY OWNED:

See Item 9 on page 2

(b) PERCENT OF CLASS:

See Item 11 on page 2

(c) NUMBER OF SHARES AS TO WHICH SUCH PERSON HAS VOTING AND DISPOSITIVE POWERS (SOLE AND SHARED):

See Items 5-8 on page 2

SCHEDULE 13G PAGE 4 OF 4 PAGES

ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS: //

Not Applicable

ITEM 6: OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:

Not Applicable

ITEM 7: IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH

ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT HOLDING

COMPANY OR CONTROL PERSON:

Not Applicable

ITEM 8: IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:

Not Applicable

ITEM 9: NOTICE OF DISSOLUTION OF GROUP:

Not Applicable

ITEM 10: CERTIFICATIONS:

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

## **SIGNATURE**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 5, 2008

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD Daniel W. Finegold

Vice President and Assistant Secretary