2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
05-19-2002 90198 007 ***150.00

DOCUMENT # 825457

1. Entity Name
AMERICAN GENERAL FINANCE MANAGEMENT CORPORATION

Principal Place of Business
601 N.W. SECOND ST.
EVANSVILLE IN 47708

Mailing Address
601 N.W. SECOND ST.
EVANSVILLE IN 47708

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 35-1070329 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PDCE	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	GEISSINGER, FREDERICK W		NAME		
STREET ADDRESS	601 NW 2ND STREET		STREET ADDRESS		
CITY-ST-ZIP	EVANSVILLE IN		CITY-ST-ZIP		
TITLE	VCFT	☐ Delete	TITLE	D SV CFO	☒ Change ☐ Addition
NAME	BREIVOGEL, DONALD R JR		NAME		
STREET ADDRESS	601 NW 2ND ST		STREET ADDRESS		
CITY-ST-ZIP	EVANSVILLE IN 47708		CITY-ST-ZIP		
TITLE	VD	☒ Delete	TITLE	T	☐ Change ☒ Addition
NAME	HANLEY, PHILIP M.		NAME	Bryan A. Binyon	
STREET ADDRESS	601 NW 2ND ST		STREET ADDRESS	601 NW 2nd St.	
CITY-ST-ZIP	EVANSVILLE IN		CITY-ST-ZIP	Evansville, IN 47708	
TITLE	SVSG	☐ Delete	TITLE	D SV S GC	☒ Change ☐ Addition
NAME	HAYES, TIMOTHY M		NAME		
STREET ADDRESS	601 NW 2ND ST		STREET ADDRESS		
CITY-ST-ZIP	EVANSVILLE IN 47708		CITY-ST-ZIP		
TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HENDRIX, BENNIE D		NAME		
STREET ADDRESS	601 NW 2ND ST		STREET ADDRESS		
CITY-ST-ZIP	EVANSVILLE IN 47708		CITY-ST-ZIP		
TITLE	SVPD	☐ Delete	TITLE	SV	☒ Change ☐ Addition
NAME	COLE, ROBERT A		NAME		
STREET ADDRESS	601 NW 2ND ST		STREET ADDRESS		
CITY-ST-ZIP	EVANSVILLE IN 47708		CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Timothy M. Hayes 4/5/02 812.468.5059
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)