

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853737

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: WELLS FARGO FOOTHILL, INC.

**Current Principal Place of Business:**

2450 COLORADO AVE  
SUITE 3000 WEST  
SANTA MONICA, CA 90404

**New Principal Place of Business:**

**Current Mailing Address:**

2450 COLORADO AVE  
SUITE 3000 WEST  
SANTA MONICA, CA 90404

**New Mailing Address:**

FEI Number: 95-2689288      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: NICKOLL, JOHN  
Address: 2450 COLORADO AVE., #3000 W  
City-St-Zip: SANTA MONICA, CA 90404

Title: VD      ( ) Delete  
Name: HILTON, DAVID  
Address: 2450 COLORADO AVE., #3000 W  
City-St-Zip: SANTA MONICA, CA 90404

Title: VS      ( ) Delete  
Name: KILBOURNE, KATHERINE  
Address: 2450 COLORADO AVE., #3000 W  
City-St-Zip: SANTA MONICA, CA 90404

Title: D      ( ) Delete  
Name: SCHWAB, PETER  
Address: 2450 COLORADO AVE., #3000 W  
City-St-Zip: SANTA MONICA, CA 90404

Title: VT      ( ) Delete  
Name: KILBOURNE, KATHERINE  
Address: 2450 COLORADO AVE., #3000 W  
City-St-Zip: SANTA MONICA, CA 90404

Title: P      ( ) Delete  
Name: JORDAN, HENRY  
Address: 2450 COLORADO AVE., #3000 W  
City-St-Zip: SANTA MONICA, CA 90404

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE KILBOURNE

SEC

01/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date