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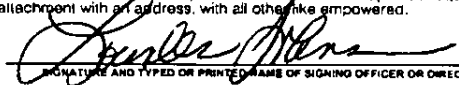
F02000002323

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # F02000002323</b>					
1. Entity Name <b>VOLKSWAGEN BANK USA</b>					
Principal Place of Business <b>5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107</b>			Mailing Address <b>5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>87-0674584</b>	
Zip	Country	Zip	Country	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>			5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-appointing)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MEIMA, HORST 5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William Schilling <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5295 South 300 West, Suite 500 Salt Lake City, UT 84107		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO RANDS, DAVID 5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCCO JOHNSON, LOURDES 5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Signature] <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOLZ, JOSEPH S 5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARNER, MARY ANN 5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACHEN, JAMES B 5295 SOUTH 300 WEST, SUITE 500 SALT LAKE CITY, UT 84107 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Lourdes Johnson		1/10/07 (801) 743-6313	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	