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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 10:18

DOCUMENT # **L43257** **(9)**

1. Corporation Name
FORD CONSUMER LOAN CORPORATION

Principal Place of Business	Mailing Address
% THE PRENTICE-HALL CORPORATION SYSTEM 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301	% THE PRENTICE-HALL CORPORATION SYSTEM 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/18/1990
3a. Date of Last Report: 04/25/1994

2. Principal Place of Business	2a. Mailing Address
21 250 E. Carpenter Frwy.	26 P.O. Box 660237
Suite, Apt. #, etc 22 Corp. Tax Dept.	Suite, Apt. #, etc. 27 Corp. Tax Dept.
City & State 23 Irving, Tx.	City & State 28 Dallas, Tx.
Zip / Country 24 75062 / 25 USA	Zip / Country 29 75266-0237 / 30 USA

4. FEI Number: 36-3689286 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and the date as required (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	HANYSAK	12 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	13 STREET ADDRESS	
CITY ST ZIP	IRVING TX	14 CITY ST ZIP	
TITLE	VPT	21 TITLE	☐ Change ☐ Addition
NAME	HUGHES, JOHN	22 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	23 STREET ADDRESS	
CITY ST ZIP	IRVING TX	24 CITY ST ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	HAYES, TIMOTHY	32 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	33 STREET ADDRESS	
CITY ST ZIP	IRVING TX	34 CITY ST ZIP	
TITLE	AVS	41 TITLE	☐ Change ☐ Addition
NAME	GREENE, PATRICK	42 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	43 STREET ADDRESS	
CITY ST ZIP	IRVING TX	44 CITY ST ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	COPELAND, WALTER	52 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	53 STREET ADDRESS	
CITY ST ZIP	IRVING TX	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	MARSHALL, HAROLD	62 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	63 STREET ADDRESS	
CITY ST ZIP	IRVING TX	64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: P. J. Greene — Patrick J. Greene — 3/31/95 — 214-541-6577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0026949 CP