

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P11093 (2)**

1. Corporation Name

AMERICAN GENERAL FINANCE OF AMERICA, INC.



Principal Place of Business

LEGAL DEPT
 601 NW 2ND ST
 EVANSVILLE IN 47708

Mailing Address

LEGAL DEPT
 601 NW 2ND ST
 EVANSVILLE IN 47708

2. Principal Place of Business		2a. Mailing Address	
21 State, Apt., etc.	26 State, Apt., etc.	27 City & State	28 City & State
22 City & State	27 City & State	28 City & State	28 City & State
23 Zip	29 Zip	30 Country	30 Country
24 Country	25 Country	29 Zip	30 Country

3. Date Incorporated or Qualified	3a. Date of Last Report
08/12/1986	02/15/1995
4. FEI Number	Applied For
23-2416228	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

11. Pursuant to the provisions of Sections 607.0602 and 607.1503, 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, Sections 607.0605, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEDBETTER, JEFFREY L.	12 NAME	
STREET ADDRESS	601 NW 2ND ST	13 STREET ADDRESS	
CITY, STATE, ZIP	EVANSVILLE IN	14 CITY, STATE, ZIP	
TITLE	CEO	2 TITLE	Chairman, CEO & President/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LEITCH, DANIEL, III	22 NAME	Frederick W. Geissinger
STREET ADDRESS	601 NW 2ND ST	23 STREET ADDRESS	601 N.W. 2nd St.
CITY, STATE, ZIP	EVANSVILLE IN	24 CITY, STATE, ZIP	Evansville, IN 47708
TITLE	T	3 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BINYON, BRYAN A.	32 NAME	
STREET ADDRESS	601 NW 2ND ST	33 STREET ADDRESS	
CITY, STATE, ZIP	EVANSVILLE IN	34 CITY, STATE, ZIP	
TITLE	VD	4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANLEY, PHILIP M.	42 NAME	
STREET ADDRESS	601 NW 2ND ST	43 STREET ADDRESS	
CITY, STATE, ZIP	EVANSVILLE IN	44 CITY, STATE, ZIP	
TITLE	VSD	5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, GARY M	52 NAME	
STREET ADDRESS	601 NW 2ND ST	53 STREET ADDRESS	
CITY, STATE, ZIP	EVANSVILLE IN	54 CITY, STATE, ZIP	
TITLE	V	6 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEELEY, DAVID C	62 NAME	
STREET ADDRESS	601 NW 2ND ST	63 STREET ADDRESS	
CITY, STATE, ZIP	EVANSVILLE FL	64 CITY, STATE, 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)(k), 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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 2-12-96
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Gary M. Smith
 812-468-5655

CR2E084 (12/95)