


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91022 049 ***150.00

DOCUMENT # P11093 1. Entity Name AMERICAN GENERAL FINANCIAL SERVICES OF AMERICA, INC.	
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Principal Place of Business LEGAL DEPT 601 NW 2ND ST EVANSVILLE, IN 47708	Mailing Address LEGAL DEPT 601 NW 2ND ST EVANSVILLE, IN 47708
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04202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-2416228	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS KIRCHNER, LEE G 601 NW 2ND ST EVANSVILLE, IN 47708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD GEISSINGER, FREDERICK W 601 NW 2ND ST EVANSVILLE, IN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCFO BREIVOGEL, DONALD R JR 601 NW 2ND ST EVANSVILLE, IN 47708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HENDRIX, BENNIE D 601 N W 2ND ST EVANSVILLE, IN 47700
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVG HAYES, TIMOTHY M 601 NW 2ND ST EVANSVILLE, IN 47708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO BLYTHE, TIMOTHY W 601 NW SECOND ST EVANSVILLE, IN 47708

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Timothy W. Blythe Timothy W. Blythe 4/23/04 812-468-5705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Associate Tax Officer