


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90056 017 ***150.00

DOCUMENT # P22078

1. Entity Name
CHRYSLER ASSET MANAGEMENT CORPORATION



Principal Place of Business
**201 MERRITT 7
 STE 700 TAX DEPT
 NORWALK, CT 06851 US**

Mailing Address
**201 MERRITT 7
 STE 700 TAX DEPT
 NORWALK, CT 06851 US**

2. Principal Place of Business
501 Merritt 7

3. Mailing Address
501 Merritt 7

Suite, Apt. #, etc.
5th Floor

Suite, Apt. #, etc.
5th Floor

City & State
Norwalk, CT

City & State
Norwalk, CT

Zip
06851

Country
US

Zip
06851

Country
US

04212004 Chg-P CR2E034 (10/03)

4. FEI Number
06-1213913

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PD BISHOP, WILLIAM S 26 CEDARWOOD DR #1 GREENWICH, CT	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS COZART, RICHARD M. 6 LAURELWOOD DRIVE NEW FAIRFIELD, CT	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIMMONS, RUBEN 201 MERRITT 7, SUITE 700 NORWALK, CT 06851	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREENFIELD, WALTER F 201 MERRIT 7 SUITE 700 NORWALK, CT 06851	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>501 Merritt 7, 5th Floor Norwalk, CT 06851</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>501 Merritt 7, 5th Floor Norwalk, CT 06851</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>501 Merritt 7, 5th Floor Norwalk, CT 06851</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>501 Merritt 7, 5th Floor Norwalk, CT 06851</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: *Ruben Simmons* **Ruben Simmons** *4/22/03* **4/22/03** *203-847-6893* **203-847-6893**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #