

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 836141 (2)

1. Corporation Name

DEERE CREDIT, INC.



Principal Place of Business

JOHN DEERE ROAD
% DEERE & COMPANY TAX DEPT.
MOLINE IL 61265

Mailing Address

JOHN DEERE ROAD
% DEERE & COMPANY TAX DEPT.
MOLINE IL 61265

3. Date Incorporated or Qualified 04/08/1976	3a. Date of Last Report 04/19/1995
4. FEI Number 36-2854862	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	

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

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
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. 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

Signature of Registered Agent (if different from the corporation's Secretary)

Signature of Registered Agent (if different from the corporation's Secretary)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	☐ DELETE	1. TITLE	☐ Change ☐ Addition
STREET ADDRESS		2. NAME	
CITY-STATE-ZIP		3. STREET ADDRESS	
NAME	☐ DELETE	4. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		5. TITLE	
CITY-STATE-ZIP		6. NAME	
NAME	☐ DELETE	7. STREET ADDRESS	☐ Change ☐ Addition
STREET ADDRESS		8. CITY-STATE-ZIP	
CITY-STATE-ZIP		9. TITLE	
NAME	☐ DELETE	10. NAME	☐ Change ☐ Addition
STREET ADDRESS		11. STREET ADDRESS	
CITY-STATE-ZIP		12. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	13. TITLE	
STREET ADDRESS		14. NAME	
CITY-STATE-ZIP		15. STREET ADDRESS	
NAME	☐ DELETE	16. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		17. TITLE	
CITY-STATE-ZIP		18. NAME	
NAME	☐ DELETE	19. STREET ADDRESS	
STREET ADDRESS		20. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		21. TITLE	
NAME	☐ DELETE	22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY-STATE-ZIP		24. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	25. TITLE	
STREET ADDRESS		26. NAME	
CITY-STATE-ZIP		27. STREET ADDRESS	
NAME	☐ DELETE	28. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		29. TITLE	
CITY-STATE-ZIP		30. NAME	
NAME	☐ DELETE	31. STREET ADDRESS	
STREET ADDRESS		32. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		33. TITLE	
NAME	☐ DELETE	34. NAME	
STREET ADDRESS		35. STREET ADDRESS	
CITY-STATE-ZIP		36. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	37. TITLE	
STREET ADDRESS		38. NAME	
CITY-STATE-ZIP		39. STREET ADDRESS	
NAME	☐ DELETE	40. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		41. TITLE	
CITY-STATE-ZIP		42. NAME	
NAME	☐ DELETE	43. STREET ADDRESS	
STREET ADDRESS		44. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		45. TITLE	
NAME	☐ DELETE	46. NAME	
STREET ADDRESS		47. STREET ADDRESS	
CITY-STATE-ZIP		48. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	49. TITLE	
STREET ADDRESS		50. NAME	
CITY-STATE-ZIP		51. STREET ADDRESS	
NAME	☐ DELETE	52. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		53. TITLE	
CITY-STATE-ZIP		54. NAME	
NAME	☐ DELETE	55. STREET ADDRESS	
STREET ADDRESS		56. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		57. TITLE	
NAME	☐ DELETE	58. NAME	
STREET ADDRESS		59. STREET ADDRESS	
CITY-STATE-ZIP		60. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	61. TITLE	
STREET ADDRESS		62. NAME	
CITY-STATE-ZIP		63. STREET ADDRESS	
NAME	☐ DELETE	64. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		65. TITLE	
CITY-STATE-ZIP		66. NAME	
NAME	☐ DELETE	67. STREET ADDRESS	
STREET ADDRESS		68. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		69. TITLE	
NAME	☐ DELETE	70. NAME	
STREET ADDRESS		71. STREET ADDRESS	
CITY-STATE-ZIP		72. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	73. TITLE	
STREET ADDRESS		74. NAME	
CITY-STATE-ZIP		75. STREET ADDRESS	
NAME	☐ DELETE	76. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		77. TITLE	
CITY-STATE-ZIP		78. NAME	
NAME	☐ DELETE	79. STREET ADDRESS	
STREET ADDRESS		80. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		81. TITLE	
NAME	☐ DELETE	82. NAME	
STREET ADDRESS		83. STREET ADDRESS	
CITY-STATE-ZIP		84. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	85. TITLE	
STREET ADDRESS		86. NAME	
CITY-STATE-ZIP		87. STREET ADDRESS	
NAME	☐ DELETE	88. CITY-STATE-ZIP	☐ Change ☐ Addition
STREET ADDRESS		89. TITLE	
CITY-STATE-ZIP		90. NAME	
NAME	☐ DELETE	91. STREET ADDRESS	
STREET ADDRESS		92. CITY-STATE-ZIP	☐ Change ☐ Addition
CITY-STATE-ZIP		93. TITLE	
NAME	☐ DELETE	94. NAME	
STREET ADDRESS		95. STREET ADDRESS	
CITY-STATE-ZIP		96. CITY-STATE-ZIP	☐ Change ☐ Addition
NAME	☐ DELETE	97. TITLE	
STREET ADDRESS		98. NAME	
CITY-STATE-ZIP		99. STREET ADDRESS	
NAME	☐ DELETE	100. CITY-STATE-ZIP	☐ Change ☐ Addition

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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T.K. JARRETT

ASST. SECY.

0 6 11 1995

DATE OF FILING: 06/11/1995

CR2E034 (12/95)