

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **139057** (4)

1. Corporation Name:
FLEET FINANCE, INC.

Principal Place of Business

**6 EXECUTIVE PARK DR., NE
SUITE 300
ATLANTA GA 30329**

Mailing Address

**6 EXECUTIVE PARK DR., NE
SUITE 300
ATLANTA GA 30329**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/08/1940	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-0335493		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ 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
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

Signature of person performing the service and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	TORKE, MICHAEL J.	
STREET ADDRESS	1333 MAIN STREET	
CITY-ST-ZIP	COLUMBIA SC 02110	
TITLE	T	☒ DELETE
NAME	MAKOWIECKI, PETER J	
STREET ADDRESS	1333 MAIN STREET	
CITY-ST-ZIP	COLUMBIA SC 02110	
TITLE	VD	☒ DELETE
NAME	COVINGTON, P. EMERY	
STREET ADDRESS	211 PERIMETER CENTER PKWY, SUITE 800	
CITY-ST-ZIP	ATLANTA GA	
TITLE	VS	☒ DELETE
NAME	FRANZEN, THERESE G	
STREET ADDRESS	211 PERIMETER CENTER PKWY, SUITE 800	
CITY-ST-ZIP	ATLANTA GA	
TITLE	P	☒ DELETE
NAME	WHITE, GORDON W.	
STREET ADDRESS	211 PERIMETER CENTER PKWY, SUITE 800	
CITY-ST-ZIP	ATLANTA GA 30348	
TITLE	S	☐ DELETE
NAME	MUTTERPERL, WILLIAM C.	
STREET ADDRESS	ONE FEDERAL STREET	
CITY-ST-ZIP	BOSTON MA 02021	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Brian T. Moynihan	
1.3 STREET ADDRESS	One Federal Way	
1.4 CITY-ST-ZIP	Boston, MA 02110	
2.1 TITLE	T	☐ Change ☒ Addition
2.2 NAME	Cleveland Fletcher	
2.3 STREET ADDRESS	6 EXECUTIVE PARK DR, NE	
2.4 CITY-ST-ZIP	ATLANTA, GA 30329	
3.1 TITLE	SVP A	☐ Change ☒ Addition
3.2 NAME	Cory L. Braun	
3.3 STREET ADDRESS	6 EXECUTIVE PARK DR, NE	
3.4 CITY-ST-ZIP	ATLANTA, GA 30329	
4.1 TITLE	SVP A	☐ Change ☒ Addition
4.2 NAME	James H. Mackie	
4.3 STREET ADDRESS	6 EXECUTIVE PARK DR, NE	
4.4 CITY-ST-ZIP	ATLANTA, GA 30329	
5.1 TITLE	PCO	☐ Change ☒ Addition
5.2 NAME	Donald F. Armstrong	
5.3 STREET ADDRESS	6 EXECUTIVE PARK DR, NE	
5.4 CITY-ST-ZIP	ATLANTA, GA 30329	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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.

CR2E034 (10/97)