2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002856

Entity Name: ALLY FINANCIAL INC.

Current Principal Place of Business:

500 WOODWARD AVENUE 10TH FLOOR DETROIT, MI 48226

Current Mailing Address:

500 WOODWARD AVENUE 10TH FLOOR DETROIT, MI 48226 US

FEI Number: 38-0572512 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Apr 24, 2023

Secretary of State

2871465374CC

Officer/Director Detail:

Title CEO, DIRECTOR Title CFO

Name BROWN, JEFFREY J. Name LACLAIR, JENNIFER A.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

10TH FLOOR 10TH FLOOR

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City-State-Zip: DETROIT MI 48226 City-State-Zip: DETROIT MI 48226

TitleSECRETARYTitleASST. TREASURERNameBELISLE, JEFFREY A.NameFRUCCI, JAY M.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

10TH FLOOR 10TH FLOOR

City-State-Zip: DETROIT MI 48226 City-State-Zip: DETROIT MI 48226

Title VP Title TREASURER

Name DEBRUNNER, DAVID J. Name BROWN, BRADLEY J.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

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City-State-Zip: DETROIT MI 48226 City-State-Zip: DETROIT MI 48226

Title DIRECTOR Title DIRECTOR

Name BACON, KENNETH J. Name BREAKIRON-EVANS, MAUREEN A.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAY M. FRUCCI CHIEF TAX OFFICER 04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

DETROIT MI 48226

City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name CARY, WILLIAM H. Name CLARK, MAYREE C.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

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Title DIRECTOR Title DIRECTOR

Name FENNEBRESQUE, KIM S. Name HOBBS, FRANKLIN "FRITZ" W.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

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DETROIT MI 48226

City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name MAGNER, MARJORIE Name STEIB, MICHAEL F.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

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Title DIRECTOR Title DIRECTOR

Name SHARPLES, BRIAN H. Name STACK, JOHN J.

Address 500 WOODWARD AVENUE Address 500 WOODWARD AVENUE

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