

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002856

**Entity Name:** ALLY FINANCIAL INC.**Current Principal Place of Business:**500 WOODWARD AVENUE  
DETROIT, MI 48226**Current Mailing Address:**500 WOODWARD AVENUE, 10 FLOOR  
CORPORATE SE  
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**Officer/Director Detail :**

Title CHIEF FINANCIAL OFFICER  
Name LACLAIR, JENNIFER A  
Address 440 S. CHURCH STREET, SUITE 1500  
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR, CHIEF EXECUTIVE OFFICER  
Name BROWN, JEFFREY  
Address 440 S. CHURCH STREET  
City-State-Zip: CHARLOTTE NC 28202

Title CONTROLLER, VICE PRESIDENT  
Name DEBRUNNER, DAVID J  
Address 500 WOODWARD AVENUE  
City-State-Zip: DETROIT MI 48226

Title SECRETARY  
Name BELISLE, JEFFREY A  
Address 500 WOODWARD AVENUE, 10 FLOOR CORPORATE  
City-State-Zip: DETROIT MI 48226

Title ASSISTANT SECRETARY  
Name FRENCH, MARY  
Address 2101 REXFORD RD STE 350W  
City-State-Zip: CHARLOTTE NC 28211

*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:** MARY FRENCH**ASSISTANT SECRETARY 06/30/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date