

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003441

FILED
Apr 25, 2013
Secretary of State
CC4748248721

Entity Name: CNH CAPITAL INSURANCE AGENCY INC.

Current Principal Place of Business:

10411 CORPORATE DR., STE 200
PLEASANT PRAIRIE, WI 53158

Current Mailing Address:

800 SUPERIOR AVE E, 21ST FL
CLEVELAND, OH 44114 US

FEI Number: 39-1867188

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 PRESIDENT/DIRECTOR
Name HOLLANDER, STUART
Address 59 MAIDEN LANE, 6TH FL
City-State-Zip: NEW YORK NY 10038

Title SECRETARY/DIRECTOR
Name UNGAR, STEPHEN
Address 59 MAIDEN LANE, 6TH FL
City-State-Zip: NEW YORK NY 10038

Title EXECUTIVE VICE PRESIDENT
Name MICHAELS, GARY S
Address 10411 CORPORATE DR. 200
City-State-Zip: PLEASANT PRAIRIE WI 53158

Title TREASURER
Name SCHLACHTER, HARRY
Address 59 MAIDEN LANE, 6TH FL
City-State-Zip: NEW YORK NY 10038

Title VICE PRESIDENT FINANCE
Name KNAPP, STEVE
Address 800 SUPERIOR AVE E, 21ST FL
City-State-Zip: CLEVELAND OH 44114

Title ASSISTANT VICE PRESIDENT
Name MOSES, BARRY
Address 800 SUPERIOR AVE E, 21ST FL
City-State-Zip: CLEVELAND OH 44114

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: STEPHEN UNGAR

SECRETARY

04/25/2013

Electronic Signature of Signing Officer/Director Detail

Date