

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005655

Entity Name: AUTOBYTEL INC.**Current Principal Place of Business:**18872 MACARTHUR BOULEVARD
SUITE 200
IRVINE, CA 92612**Current Mailing Address:**18872 MACARTHUR BOULEVARD
SUITE 200
IRVINE, CA 92612 US**FEI Number:** 33-0711569**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PARK DRIVE
SUITE A
TALLAHASSEE, FL 32301 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 DIRECTOR, PRESIDENT, CEO
Name COATS, JEFFREY H
Address 18872 MACARTHUR BLVD., SUITE 200
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name KAPLAN, MARK N
Address FOUR TIMES SQUARE, 45TH FLOOR
City-State-Zip: NEW YORK NY 10036

Title EVPS
Name FULLER, GLENN E
Address 18872 MACARTHUR BLVD., SUITE 200
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name CARPENTER, MICHAEL A.
Address 18872 MACARTHUR BOULEVARD
SUITE 200
City-State-Zip: IRVINE CA 92612

Title CHAIRMAN
Name FUCHS, MICHAEL J
Address 800 THIRD AVENUE, STE. 3700
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name STIBEL, JEFFREY M
Address 22761 PACIFIC COAST HWY.
City-State-Zip: MALIBU CA 90265

Title CFO
Name BOREN, KIMBERLY S
Address 18872 MACARTHUR BLVD., SUITE 200
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name THOMPSON, JANET M.
Address 18872 MACARTHUR BOULEVARD
SUITE 200
City-State-Zip: IRVINE CA 92612

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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: GLENN E. FULLER**SECRETARY****01/19/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DE TEZANOS, MATIAS
Address 18872 MACARTHUR BOULEVARD
SUITE 200
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name MYLOD, JR., ROBERT J.
Address 18872 MACARTHUR BOULEVARD
SUITE 200
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name VARGAS, JOSE
Address 18872 MACARTHUR BOULEVARD
SUITE 200
City-State-Zip: IRVINE CA 92612