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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 139057 (4)

1. Corporation Name

FLEET FINANCE, INC.



Principal Place of Business

30 PERIMETER PARK
ATLANTA GA 30341

Mailing Address

30 PERIMETER PARK
ATLANTA GA 30341

3. Date Incorporated or Qualified
05/08/1940

3a. Date of Last Report
04/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

000001828320

83

-05/20/96--01022--032

84 City

***200.00

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 typed or printed name of registered agent has this date of filing

(PSE) Registered Agent signature required when making filing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☒ DELETE
NAME POELKER, JOHN S
STREET ADDRESS 211 PERIMETER CENTER PKWY SUITE 800
CITY-ST-ZIP ATLANTA GA

11 TITLE CD ☒ Change ☐ Addition
12 NAME Torke, Michael J.
13 STREET ADDRESS 211 Perimeter Center Pkwy, Suite 800
14 CITY-ST-ZIP Atlanta, GA

TITLE VD ☒ DELETE
NAME IRELAND, KATHLEEN M
STREET ADDRESS 211 PERIMETER CENTER PKWY, SUITE 800
CITY-ST-ZIP ATLANTA GA

21 TITLE T ☒ Change ☐ Addition
22 NAME Pannone, Richard
23 STREET ADDRESS 111 Westminster Street
24 CITY-ST-ZIP Providence, RI 02903

TITLE V ☐ DELETE
NAME COVINGTON, P. EMERY
STREET ADDRESS 211 PERIMETER CENTER PKWY, SUITE 800
CITY-ST-ZIP ATLANTA GA

31 TITLE VD ☐ Change ☒ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE VS ☐ DELETE
NAME FRANZEN, THERESE G
STREET ADDRESS 211 PERIMETER CENTER PKWY, SUITE 800
CITY-ST-ZIP ATLANTA GA

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE V ☒ DELETE
NAME SCRUGGS, B. DAVID
STREET ADDRESS 60 FOAL DRIVE
CITY-ST-ZIP ROSWELL GA

51 TITLE P ☒ Change ☐ Addition
52 NAME White, Gordon W.
53 STREET ADDRESS 211 Perimeter Center Pkwy, Suite 800
54 CITY-ST-ZIP Atlanta, GA 30346

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE S ☐ Change ☒ Addition
62 NAME Mutterperl, William C.
63 STREET ADDRESS 111 Westminster Street
64 CITY-ST-ZIP Providence, RI 02903

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Therese G. Franzen

April 22, 1996

(770) 392-2400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)