

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 802337 (6)  
1. Corporation Name  
GENERAL MOTORS ACCEPTANCE CORPORATION

Principal Place of Business

767 FIFTH AVE  
NEW YORK NY 10153  
US

Mailing Address

3044 W GRAND BLVD  
MC 482 103 311  
DETROIT MI 48202  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/24/1925

4. FEI Number

38-0572512

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	RINES, JOHN R.	
STREET ADDRESS	3044 WEST GRAND BLVD	
CITY- ST- ZIP	DETROIT MI	

TITLE		<input type="checkbox"/> DELETE
NAME	HAUSEMAN, SUSAN G	
STREET ADDRESS	3044 WEST GRAND BLVD	
CITY- ST- ZIP	DETROIT MI	

TITLE	EVPO	<input type="checkbox"/> DELETE
NAME	CLOUT, RICHARD J S.	
STREET ADDRESS	3044 WEST GRAND BLVD.	
CITY- ST- ZIP	DETROIT MI	

TITLE	DVPC	<input checked="" type="checkbox"/> DELETE
NAME	FELDSTAIN, ERIC A.	
STREET ADDRESS	3044 W. GRAND BLVD	
CITY- ST- ZIP	DETROIT MI	

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MERRYMAN, GREGORY K	
STREET ADDRESS	3031 W. GRAND BLVD.	
CITY- ST- ZIP	DETROIT MI	

TITLE	EVPO	<input type="checkbox"/> DELETE
NAME	GIBSON, JOHN E.	
STREET ADDRESS	3044 WEST GRAND BLVD	
CITY- ST- ZIP	DETROIT MI	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	J. D. Finnegan	
1.3 STREET ADDRESS	3044 W. Grand Blvd.	
1.4 CITY- ST- ZIP	Detroit MI 48202	

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		

4.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	J. R. Barrett, Jr.	
4.3 STREET ADDRESS	3044 W. Grand Blvd.	
4.4 CITY- ST- ZIP	Detroit, MI 48202	

5.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	C. L. Quenneville	
5.3 STREET ADDRESS	3044 W. Grand Blvd.	
5.4 CITY- ST- ZIP	Detroit, MI 48202	

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 

C.L. Quenneville, Secretary 313-556-1091

CR2E034 (10/97)