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PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **814361** **(2)**

1. Corporation Name
AFCO CREDIT CORPORATION

Principal Place of Business	Mailing Address
10 HANOVER STREET **NEW YORK NEW YORK 10004**	**10 HANOVER STREET** **NEW YORK NEW YORK 10004-2504**

3. Date Incorporated or Qualified: **04/26/1960**
3a. Date of Last Report: **02/05/1996**

2. Principal Place of Business
21 | 22 Suite, Apt. #, etc. | 23 City & State | 24 Zip | 25 Country

2a. Mailing Address
26 | 27 Suite, Apt. #, etc. | 28 City & State | 29 Zip | 30 Country

4. FEI Number: **13-5647901** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
12000 SOUTH 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**VP** **FISCHER, HENRY M** **401 FIRST AVENUE** **NEW YORK NY**	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	**SVP** Donald E. Rogers 1 Split Rail Court Lebanon, NJ 08833	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**SVPS** **RATNER, ROBERT J** **839 LAMBERTS MILL ROAD** **WESTFIELD NJ**	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**SVP** **BAIRD, RICHARD S.** **100 MICHELLE LN.** **BELLE MEAD, NJ.**	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**PD** **NISBET, MICHAEL M.** **POST HOUSE ROAD** **NEW VERNON NJ**	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**SVPD** **HOUGHT, DEREK E** **187 BAYBERRY AVENUE** **WATCHUNG NJ**	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	**VP** Frederick B. Ollett,III 51 Locust Lane Upper Saddle River, NJ 07458	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**SVP** **BRECKENRIDGE, ROBERT M.** **670 SHAWNEE DR.** **FRANKLIN LAKES NJ**	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/96)

14. I do 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: Robert J Ratner SVP+Secy 4/15/97 2126123527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004690