

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 820226

FILED
May 01, 2008
Secretary of State

Entity Name: TEXTRON FINANCIAL CORPORATION

Current Principal Place of Business:

40 WESTMINSTER STREET
PROVIDENCE, RI 02903

New Principal Place of Business:

Current Mailing Address:

40 WESTMINSTER STREET
PROVIDENCE, RI 02903

New Mailing Address:

FEI Number: 05-6008768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOVEJOY, MARY F
Address: 40 WESTMINSTER ST.
City-St-Zip: PROVIDENCE, RI 02940

Title: DCEO () Delete
Name: FRENCH, THEODORE R
Address: 40 WESTMINSTER STREET
City-St-Zip: PROVIDENCE, RI 02903

Title: PCOO () Delete
Name: CARTER, BUELL J
Address: 40 WESTMINSTER ST
City-St-Zip: PROVIDENCE, RI 02903

Title: EVP () Delete
Name: KUHLMEYER, MARTINA K
Address: 40 WESTMINSTER ST
City-St-Zip: PROVIDENCE, RI 02903

Title: SVPT () Delete
Name: LYNN, BRIAN F
Address: 40 WESTMINSTER ST
City-St-Zip: PROVIDENCE, RI 02940

Title: EVPS () Delete
Name: PERKINS, ELIZABETH C
Address: 40 WESTMINSTER STREET
City-St-Zip: PROVIDENCE, RI 02903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELIZABETH C PERKINS

EVPS

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date