2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853737

Entity Name: WELLS FARGO FOOTHILL, INC.

Apr 13, 2009 Secretary of State

2450 COLORADO AVE SUITE 3000 WEST SANTA MONICA, CA 90404

Current Principal Place of Business:

Current Mailing Address: New Mailing Address:

2450 COLORADO AVE SUITE 3000 WEST SANTA MONICA, CA 90404

FEI Number: 95-2689288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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

New Principal Place of Business:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete () Change () Addition Name: JORDAN, HENRY Name: 2450 COLORADO AVE., #3000 W Address: Address: City-St-Zip: SANTA MONICA, CA 90404 City-St-Zip: VD Title: Title: () Delete () Change () Addition Name: HILTON, DAVID Name: 2450 COLORADO AVE., #3000 W Address: Address: SANTA MONICA, CA 90404 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition KILBOURNE, KATHERINE Name: Name: 2450 COLORADO AVE., #3000 W Address: Address: City-St-Zip: SANTA MONICA, CA 90404 City-St-Zip: Title: () Delete Title: () Change () Addition SCHWAB, PÈTER Name: Name: Address: 2450 COLORADO AVE., #3000 W Address: City-St-Zip: SANTA MONICA, CA 90404 City-St-Zip: Title: Title: () Delete () Change () Addition KILBOURNE, KATHERINE Name: Name:

2450 COLORADO AVE., #3000 W Address: Address: City-St-Zip: SANTA MONICA, CA 90404 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: JORDAN, HENRY Name: 2450 COLORADO AVE., #3000 W Address: Address: City-St-Zip: City-St-Zip: SANTA MONICA, CA 90404

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: KATHERINE KILBOURNE VS 04/13/2009