

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 854436

1. Entity Name
AMERICAN EXPRESS BANK LTD.



Principal Place of Business
**200 VESEY STREET
WFC-3 SECRETARYS OFFICE
NEW YORK, NY 10285 US**

Mailing Address
**200 VESEY STREET
WFC-3 TAX DEPT
NEW YORK, NY 10285-3002 US**

DO NOT WRITE IN THIS SPACE



04062006 No Chg-P CR2E034 (11/05)

4. FEI Number
13-4922260

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when restate)

100000587

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

1472706-20057-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	HOLMES, RICHARD W
STREET ADDRESS	200 VESEY STREET
CITY-ST-ZIP	NEW YORK, NY 10285
TITLE	S
NAME	NORMAN, STEPHEN
STREET ADDRESS	200 VESEY STREET
CITY-ST-ZIP	NEW YORK, NY 10285
TITLE	GC
NAME	KOURIDES, NICHOLAS
STREET ADDRESS	200 VERSEY STREET
CITY-ST-ZIP	NEW YORK, NY 10285
TITLE	T
NAME	HOUGH, PAUL H
STREET ADDRESS	200 VERSEY STREET
CITY-ST-ZIP	NEW YORK, NY 10285
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen P. Norman

Date

4/7/06

Daytime Phone #

212-640-2918