

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

06 AUG -7 AM 7:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # 855809	
1. Entity Name NISSAN MOTOR ACCEPTANCE CORPORATION	



Principal Place of Business 990 WEST 190TH ST P.O. BOX 3246 TORRANCE, CA 90502 US	Mailing Address P.O. BOX 650214 ATTN: PENNY DOUGHTY DALLAS, TX 75265 US
--	--

2. Principal Place of Business 333 Commerce Street	3. Mailing Address P.O. Box 650214
---	---------------------------------------

Suite, Apt. #, etc. 7th Floor	Suite, Apt. #, etc. Attn: Penny Doughty
----------------------------------	--

City & State Nashville, TN	City & State Dallas, TX
-------------------------------	----------------------------

Zip 37201	Country us	Zip 75265	Country us
--------------	---------------	--------------	---------------

07252006 Chg-P CR2E034 (11/05)

4. FEI Number 95-3680386	Applied For <input type="checkbox"/> Not Applicable
-----------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent LEXISNEXIS DOCUMENT SOLUTIONS INC. 1201 HAYS STREET TALLAHASSEE, FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	--

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAMBERT, STEVEN R 990 W. 190TH STREET TORRANCE, CA 90502 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/CEO/Chair of Board Lambert, Steven R 333 Commerce St., 7th Floor Nashville, TN 37201 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EDWARDS, JEFFREY L 8900 FREEPORT PARKWAY IRVING, TX 75063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Mike McConnell 333 Commerce St., 7th Floor Nashville, TN 37201 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRENCH, JOHN A 990 W 190TH ST TORRANCE, CA <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Alan R. Hunn 8900 Freeport Parkway Irving, Texas 75063 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DERIAN, SUSAN M 990 W 190TH STREET TORRANCE, CA 90502 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Kazama, Kazuhiko 333 Commerce Street, 7th Floor Nashville, TN 37201 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KAZAMA, KAZUHIKO 990 W 190TH STREET TORRANCE, CA 90502 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COB MORTON, JAMES C JR 18501 S FIGUEROA ST GARDENA, CA 90248 <input checked="" type="checkbox"/> Delete

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: Alan R. Hunn 8/4/06 9214-596-5154
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2C 8/9