

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90095 003 ***150.00

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1. Entity Name
HSBC MOTOR CREDIT (USA) INC.



Principal Place of Business

ONE HSBC CENTER
BUFFALO, NY 14203

Mailing Address

2700 SANDERS RD
TAX DEPT 25
PROSPECT HEIGHTS, IL 60070

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

HSBC Finance Corporation

04212008

Chg-P

CR2E034 (12/06)

City & State

City & State
Tax Department - 1 SW
26525 N. Riverwoods Blvd.

4. FEI Number

16-1402360

Applied For

Not Applicable

Zip Country

Zip
Mettawa, IL 60046

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME JENTSCH, DAVID
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203

TITLE V ☐ Delete
NAME KRUSE, MICHAEL
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203

TITLE S ☐ Delete
NAME WIENCEK, MARK A
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203

TITLE T ☐ Delete
NAME BUCKNALL, CLIVE
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203

TITLE AS ☐ Delete
NAME ANGELO, JOSEPH
STREET ADDRESS 2700 SANDERS RD
CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition
NAME E. Bansal
STREET ADDRESS 452 Fifth Ave
CITY-ST-ZIP NY, NY 10018

TITLE Vice President ☒ Change ☐ Addition
NAME K. Patton
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME J. R. Simpson
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 26525 N. Riverwoods Blvd.
CITY-ST-ZIP Mettawa, IL 60045

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/23/2008

224-554-6405