

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001634

FILED
Mar 15, 2006
Secretary of State

Entity Name: TOYOTA MOTOR INSURANCE SERVICES, INC.

Current Principal Place of Business:

C/O CORP. TAX DEPT.
19001 SO. WESTERN AVE.
TORRANCE, CA 90501

New Principal Place of Business:

TOYOTA FINANCIAL SERVICES
19001 SO. WESTERN AVE.
TORRANCE, CA 90501

Current Mailing Address:

C/O CORP TAX DEPT
19001 S WESTERN AVE
TORRANCE, CA 90501 US

New Mailing Address:

% LEGAL DEPARTMENT
19001 S WESTERN AVE EF12
TORRANCE, CA 90501 US

FEI Number: 33-0178825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPROATION SYSTEM, INC.
1201 HAYS ST
STE 105
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BORST, GEORGE E
Address: 19001 S. WESTERN AVENUE
City-St-Zip: TORRANCE, CA 90501

Title: T () Delete
Name: NAGASHINO, TADASHI
Address: 19001 S. WESTERN AVENUE
City-St-Zip: TORRANCE, CA 90501

Title: GVP () Delete
Name: PELLICIONI, DAVID
Address: 19001 S. WESTERN AVENUE
City-St-Zip: TORRANCE, CA 90501

Title: SD () Delete
Name: PELLICIONI, DAVID
Address: 19001 S. WESTERN AVENUE
City-St-Zip: TORRANCE, CA 90501

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID PELLICIONI

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03/15/2006

Electronic Signature of Signing Officer or Director

Date