

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90043 019 ***150.00

DOCUMENT # F93000001794

1. Entity Name
NEWCOURT COMMUNICATIONS FINANCE CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
2 GATEHALL DR **2 GATEHALL DR**
PARSIPPANY NJ 07054 **PARSIPPANY NJ 07054-4521**
US **US**

2. Principal Place of Business 3. Mailing Address
650 CIT Drive **650 CIT Drive**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Livingston **Livingston**
 Zip Country Zip Country
07039 **07039**

4. FEI Number **22-3211455** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE *[Signature]* DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back).

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO HUDSON, STEVEN K 2 GATEHALL DR PARSIPPANY NJ 07054 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>See attached</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HAMMIL, TIMOTHY D 2 GATEHALL DR PARSIPPANY NJ 07054 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANKS, F 2 GATEHALL DR PARSIPPANY NJ 07054 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VOTEK, GLENN 2 GATEHALL DR PARSIPPANY NJ 07054 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S INGATO, ROBERT J 2 GATEHALL DR PARSIPPANY NJ 07054 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTO BROWER, MARK P 2 GATEHALL DR PARSIPPANY NJ 07054 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **DAVID W. BROWN** DATE: **4/25/00** DAYTIME PHONE #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)

AT&T Credit Consumer Finance Corporation
FEIN: 22-3014155

79300009794
 B00097110

<u>DIRECTORS</u>	<u>TITLE</u>	<u>SS#</u>	<u>BUSINESS ADDRESS</u>
Bradley D. Nullmeyer	Director	462-73-1076	650 CIT Drive, Livingston, NJ 07039
<u>OFFICERS</u>			
Bradley D. Nullmeyer	President	462-73-1076	650 CIT Drive, Livingston, NJ 07039
Robert J. Ingato	Executive Vice President	156-54-4928	650 CIT Drive, Livingston, NJ 07039
Daniel A. Jauernig	Ex. VP and CFO	472-938-562	650 CIT Drive, Livingston, NJ 07039
Sara R. McAuley	Ex VP - Corp Resource Officer	322-542482	650 CIT Drive, Livingston, NJ 07039
Glenn A. Votek	Ex VP and Treasurer	136-52-5671	650 CIT Drive, Livingston, NJ 07039
John G. Jakolev	Sr VP - Tax	434-62-5950	650 CIT Drive, Livingston, NJ 07039
Scott J. Moore	Sr. VP - Legal, Gen Counsel, and Sec.	160-56-2515	650 CIT Drive, Livingston, NJ 07039
Douglas P. Trump	Asst. Secretary	195-36-5669	650 CIT Drive, Livingston, NJ 07039
John C. Chobot	Asst. Secretary	109-38-6806	650 CIT Drive, Livingston, NJ 07039
John P. Stevenson	Asst. Secretary	426-09-5049	650 CIT Drive, Livingston, NJ 07039
Mark P. Brower	AVP - Tax	153-42-2206	650 CIT Drive, Livingston, NJ 07039
Louis J. Devico	Director of State and Local Tax	084-42-2467	650 CIT Drive, Livingston, NJ 07039