

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93000004714 (2)**

1. Corporation Name

AUTOMOBILE CREDIT ACCEPTANCE CORP.



Principal Place of Business

700 N. PEARL ST., SUITE 400
DALLAS TX 75201

Mailing Address

700 N. PEARL ST., SUITE 400
DALLAS TX 75201

2. Principal Place of Business

2a. Mailing Address

21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person named in block 9, agent for the corporation

Signature of the Agent for the corporation, who is not the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	TENNEY, ANDREW L.	
STREET ADDRESS	700 N. PEARL ST., STE. 400	
CITY- ST- ZIP	DALLAS TX	
TITLE	VPCS	<input type="checkbox"/> DELETE
NAME	IDZI, ROBERT D.	
STREET ADDRESS	700 N. PEARL ST., STE. 400	
CITY- ST- ZIP	DALLAS TX	
TITLE	VPAS	<input checked="" type="checkbox"/> DELETE
NAME	ADAMS, LLOYD E.	
STREET ADDRESS	700 N. PEARL ST., STE. 400	
CITY- ST- ZIP	DALLAS TX	
TITLE	VPAS	<input type="checkbox"/> DELETE
NAME	MALONE, CAROLYN J.	
STREET ADDRESS	700 N. PEARL ST., SUITE 400	
CITY- ST- ZIP	DALLAS TX	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	George C. Evans	
13 STREET ADDRESS	700 N. Pearl St., Ste. 400, LB401	
14 CITY- ST- ZIP	Dallas, TX 75201-7490	
21 TITLE	Exec VP & CFO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY- ST- ZIP		
31 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Joe B. Dorman	
33 STREET ADDRESS	700 N. Pearl St., Ste. 400, LB401	
34 CITY- ST- ZIP	Dallas, TX 75201-7490	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY- ST- ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY- ST- ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY- ST- ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Robert D. Idzi*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert D. Idzi, EVP & CFO 4/3/96

CR2E034 (12/95)