

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # F93000005382

1. Entity Name
VEHICLE ACCEPTANCE CORPORATION



Principal Place of Business

4144 N CENTRAL EXPWY
SUITE 350
DALLAS, TX 75204 US

Mailing Address

4144 N CENTRAL EXPWY
SUITE 350
DALLAS, TX 75204 US



01152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-2303698

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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**

U000000811926
02/12/08-80026-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	XAVIER, DAINA
STREET ADDRESS	3148 MELODY LANE
CITY-ST-ZIP	PRINCETON, TX 75407
TITLE	SD
NAME	STAUNTON, HEATHER
STREET ADDRESS	3836 MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS, TX 75205
TITLE	D
NAME	NEUBAUER, JONATHAN
STREET ADDRESS	4722 PURDUE
CITY-ST-ZIP	DALLAS, TX 75209
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Daina Xavier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-15-2008

Date

214.599.9510

Daytime Phone #