### FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

700 STATE STREET

RACINE WI 53404

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

# DOCUMENT # F94000002617

1. Corporation Name

Principal Place of Business 700 STATE STREET

RACINE WI 53404

CASE CREDIT CORPORATION

| US                      |  | US   |             | DO NOT WRITE IN THIS SPACE                                |   |               |              |
|-------------------------|--|--|-------------|---|---|---------------|--------------|
| 00                      |  | 30   |             |   | 3. Date Incorporated or Qualifed                          |               |              |
|                         |  |  |             |   | 05/19/1994  |               | Ĭ            |
| 2. Principal Pl         | ace of Business                                    | 2a. Mailing Address                                |             |   | 4. FEI Number   | Api           | plied For    |
| 21                      |  | 26   |             |   | 76-0394710  | No            | t Applicable |
| Suite, Apt.             | # etc  | Suite, Apt. #, etc.                                |             |   |   | \$8.75 A      | Additional   |
| 22                      |  | 27   |             |   | 5. Certificate of Status Desired                          | Fee Re        |              |
| City & State            | 9  | City & State                                       | •           |   | 6. Election Campaign Financing                            | \$5.00        | May Be       |
| 23                      |  | 28   |             |   | Trust Fund Contribution                                   | Added to      |              |
| Zip                     | Country  | Zip  | Country     |   | 8. This corporation owes the current year Inte            | angible       |              |
| 24                      | 25   | 29 3   | 0           |   | Personal Property Tax.                                    |               | □No          |
|                         | 9. Name and Address of Curren                      |  |             |   | 10. Name and Address of New Registered                    | Agent         |              |
|                         |  |  | 81          | Name  |   |               |              |
| CT CORPORATION SYSTEM   |  |  |             | 20 Observed Address (D.O. Day Murchas in Mot Apparatchic) |   |               |              |
| 1200 S. PINE ISLAND RD. |  |  | 82          | Street A  | ddress (P.O. Box Number is Not Acceptable)                |               |              |
| PLAN                    | NTATION FL 33324                                   |  | 83          |   |   |               |              |
|                         |  |  |             |   |   |               |              |
|                         |  |  | 84          | City  | FL  | 85 Zip C      | Code         |
| 77 5                    | L. H   | 2 and 607 1509 Elorida Statutas                    | the above   | a-named co  | progration submits this statement for the purpose of      | changing its  | registered   |
| office or re            | egistered agent, or both, in the State             | of Florida. Such change was auti                   | norizea by  | tne corpor  | ation's board of directors. I hereby accept the appoin    | ntment as reg | gistered     |
| agent. I ar             | m familiar with, and accept the obliga             | tions of, Section 607.0505, Florid                 | la Statutes | •   |   |               |              |
| SIGNATURE               |  |  |             |   | uired when reinstation) DATE                              |               |              |
|                         | Signature, typed or printed name of registered age | nt and litle if applicable. (NOTE: R  ID DIRECTORS | 13,         | t signature req   | uired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AN | ID DIRECTO    | RS IN 12     |
| TITLE                   | P  | DELETE   | 1.1 TITLE   |   | ADDITIONAL CONTROL OF THE LINE THE                        | Change        | Addition     |
|                         | GANGL KENNETH R                                    | _ Detert   | 1.2 NAME    |   |   |               | _            |
| NAME                    | 700 STATE STREET                                   |  |             | 4B00500   |   |               |              |
| STREET ADDRESS          |  |  | 1.3 STREET  |   |   |               |              |
| CITY-ST-ZIP             | RACINE WI  | ☐ DELETE   | 1.4 CITY-5  | I-ZIP   |   | ☐ Change      | Addition     |
| TITLE                   | D DOGGO JEAN DIEDOE                                | □ DECEIE   | 2.1 TITLE   |   |   | onange        |              |
| NAME                    | ROSSO, JEAN-PIERRE                                 |  | 2.2 NAME    | i   |   |               |              |
| STREET ADDRESS          | 700 STATE STREET                                   |  | 2.3 STREET  |   |   |               | 1            |
| CITY-ST-ZIP             | RACINE WI  |  | 2.4 CITY-S  | T-25P   |   | Change        | Addition     |
| TITLE                   | DSVT   | ☐ DELETE   | 3.1 TITLE   |   |   | Criange       |              |
| NAME                    | FRENCH, THEODORE R                                 |  | 3.2 NAME    |   |   |               |              |
| STREET ADDRESS          | 700 STATE STREET                                   |  | 3.3 STREE   | ADDRESS   |   |               |              |
| CITY-ST-ZIP             | RACINE WI  |  | 3.4. CITY-S | T-ZIP   |   |               |              |
| TITLE                   | AS   | ☐ DELETE   | 4.1 TITLE   |   |   | Change        | ☐ Addition   |
| NAME                    | EBERHARDT, MARSHA J                                |  | 4. 2 NAME   |   |   |               |              |
| STREET ADDRESS          | 700 STATE STREET                                   |  | 4.3 STREE   | ADDRESS   |   |               |              |
| CITY-ST-ZIP             | RACINÈ WI  |  | 4.4 CITY-S  | T- ZIP  |   |               |              |
| TITLE                   | ТО   | ☐ DELETE   | 5.1 TITLE   | 1   |   | ☐ Change      | Addition     |
| NAME                    | STANCZYK, THOMAS J                                 |  | 5.2 NAME    |   |   |               |              |
| STREET ADDRESS          | 700 STATE STREET                                   |  | 5.3 STREET  | ADDRESS   |   |               |              |
| CITY-ST-ZIP             | RACINE WI 53404                                    |  | 5.4 CITY-S  | T-ZIP   |   |               |              |
| TITLE                   | VP.  | ☐ DELETE   | 6.1 TITLE   |   |   | ☐ Change      | ☐ Addition   |
| NAME                    | EVARD, JR J E                                      |  | 6.2 NAME    |   |   |               |              |
|                         | 700 STATE STREET                                   |  | 63 STREET   | ADDRESS   |   |               |              |

CITY-ST-ZIP 14. 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 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

**RACINE WI** 

ELLUIRED G OFFICER OR DIRECTOR

04/16/99

(414)636-5081

**FILED** 

May 05, 1999 8:00 am Secretary of State

05-05-1999 90091 034 \*\*\*150.00

CR2E034 (11/98)

## **Directors, Officers Report**

Case Credit Corporation as of Thursday, December 31, 1998

490321-90091-34 F94000002617 Monday, March 29, 1999

### **DIRECTORS**

Theodore R. French

Director

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Kenneth R. Gangl

Director

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Andrew E. Graves

Director

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

### **OFFICERS**

Theodore R. French

Chairman of the Board

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Kenneth R. Gangl

President and Chief Executive Officer Case Corporation

Primary Address:

700 State Street

Racine, Wisconsin 53404

Andrew E. Graves

Vice Chairman

Primary Address:

Case Corporation

700 State Street

Racine, Wisconsin 53404

Frank A. Anglin III

Senior Vice President

Primary Address:

700 State Street

Racine, WI 53404

Robert A. Wegner

Senior Vice President and Chief Financial Officer

Primary Address:

Case Corporation

700 State Street

Racine, Wisconsin 53404

Dawn M. Beck

Vice President, Finance Counsel and Assistant Secretary

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

James S. Broenen

Vice President and Controller

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Case Credit Corporation

Primary Address:

Case Corporation

700 State Street

Racine, Wisconsin 53404

John E. Evard, Jr.

Vice President

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Kevin J. Hallagan

Vice President and Secretary

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Peter Hong

Vice President and Assistant Treasurer

700 State Street Primary Address:

Racine, WI 53402

Robert J. Naglieri

Vice President

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Ralph A. Than

Vice President and Treasurer

Primary Address:

Case Corporation

700 State Street

Racine, Wisconsin 53404

Marsha J. Eberhardt

**Assistant Secretary** 

Primary Address:

Case Corporation 700 State Street

Racine, Wisconsin 53404

Steven T. Mielke

Assistant Treasurer

Primary Address:

700 State Street

Racine, Wisconsin, 53404, U.S.A.

Kathleen T. Powers

Assistant Treasurer

Primary Address:

700 State Street

Racine, WI 53404

Robert G. Wesley

Assistant Treasurer

Primary Address:

700 State Street Racine, WI 53404

Thomas J. Stanczyk

Tax Officer

Primary Address:

700 State Street

Racine, Wisconsin 53404

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