

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90029 021 ***150.00

DOCUMENT # F94000002617

1. Entity Name
CASE CREDIT CORPORATION



Principal Place of Business Mailing Address
700 STATE STREET **700 STATE STREET**
RACINE, WI 53404 US **RACINE, WI 53404 US**

40013400



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

01172005 Chg-P CR2E034 (10/03)

City & State City & State

4. FEI Number Applied For
76-0394710 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD LECOMTE, MICHEL 100 S SAUNDERS ROAD LAKE FOREST, IL 60045 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GRIMM, PHYLLIS 100 S SAUNDERS ROAD LAKE FOREST, IL 60045 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO LESKOWICZ, JOANNE 700 STATE STREET RACINE, WI 53404 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAHILL, BRIAN 700 STATE STREET RACINE, WI 53404 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FORNARO, ALBERTO 100 S. SAUNDERS ROAD LAKE FOREST, IL 60045 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT MAGGIORA, GIOVANNI 100 S SAUNDERS ROAD LAKE FOREST, IL 60045 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP YORK, WILLIAM L. 100 SOUTH SAUNDERS ROAD LAKE FOREST, IL 60045 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREGORY J. TAYLOR 233 LAKE AVENUE RACINE, WI 53404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald R. Costa Date: 1/28/05 Daytime Phone #: 262-636-6862

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40015480

F94000002617

Kathleen Nuzzi Assistant Secretary
100 South Saunders Road
Lake Forest, IL 60045

Linda M. Smith Assistant Secretary
100 South Saunders Road
Lake Forest, IL 60045

Brian J. O'Keane Assistant Treasurer
100 South Saunders Road
Lake Forest, IL 60045

Donald R. Costa Tax Officer
700 State Street
Racine, WI 53403

Joanne K. Leskowicz Tax Officer
700 State Street
Racine, WI 53403

Steven Haynes Tax Officer
700 State Street
Racine, WI 53403

12/31/04

ATTACHMENT

40015480

F94000002617

Case Credit Corporation

Directors

Michel Lecomte

100 South Saunders Road
Lake Forest, IL 60045

Mario Ferla

100 South Saunders Road
Lake Forest, IL 60045

Officers

Michel Lecomte

Chairman

100 South Saunders Road
Lake Forest, IL 60045

Mario Ferla

President

100 South Saunders Road
Lake Forest, IL 60045

L. William York

Senior Vice President

100 South Saunders Road
Lake Forest, IL 60045

Giovanni Maggiora

Vice President and Treasurer

100 South Saunders Road
Lake Forest, IL 60045

Richard R. Dykhous

Vice President and Secretary

100 South Saunders Road
Lake Forest, IL 60045

Joseph Doolan

Controller

100 South Saunders Road
Lake Forest, IL 60045

Gregory J. Taylor

Vice President

233 Lake Avenue
Racine, WI 53403

Troy E. Price

Vice President

233 Lake Avenue
Racine, WI 53403

Phyllis E. Grimm

Vice President

100 South Saunders Road
Lake Forest, IL 60045