

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F94000003400

1. Entity Name
BENEFICIAL ALABAMA, INC.



FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90095 048 ***150.00

Principal Place of Business
2700 SANDERS RD
ATTN: TAX DEPT
PROSPECT HEIGHTS, IL 60070

Mailing Address
2700 SANDERS RD
ATTN: TAX DEPT
PROSPECT HEIGHTS, IL 60070



2. Principal Place of Business - No P.O. Box #		3. Mailing Address		04212008 Chg-P CR2E034 (12/06)	
Suite, Apt. #, etc. HSBC Finance Corporation		Suite, Apt. #, etc. HSBC Finance Corporation		4. FEI Number 51-0347555	
City & State Tax Department - 1 SW		City & State Tax Department - 1 SW		Applied For Not Applicable	
26525 N. Riverwoods Blvd.		26525 N. Riverwoods Blvd.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Mettawa, IL 60045		Mettawa, IL 60045			

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

SIGNATURE _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DP <input type="checkbox"/> Delete NAME ESPOSITO, GARY R STREET ADDRESS 3023 HSBC WAY CITY-ST-ZIP FORT MILL, SC 29715		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE VPS <input type="checkbox"/> Delete NAME ABRAMS, LORETTA R STREET ADDRESS 2700 SANDERS ROAD CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070		TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS 26525 N. Riverwoods Blvd. CITY-ST-ZIP Mettawa, IL 60045	
TITLE VPT <input type="checkbox"/> Delete NAME ANDERSON, DANIEL W STREET ADDRESS 2700 SANDERS ROAD CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070		TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS 26525 N. Riverwoods Blvd. CITY-ST-ZIP Mettawa, IL 60045	
TITLE EVPC <input checked="" type="checkbox"/> Delete NAME GREENE, J.T. STREET ADDRESS 2700 SANDERS ROAD CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE AS <input type="checkbox"/> Delete NAME ANGELO, J.M. STREET ADDRESS 2700 SANDERS ROAD CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070		TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS 26525 N. Riverwoods Blvd. CITY-ST-ZIP Mettawa, IL 60045	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	

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: *J.M. Angelo* 4/23/2008 224-554-6405
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #