

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2007 08:00 A
Secretary of State

DOCUMENT # F94000005711

1. Entity Name
HSBC AUTO ACCOUNTS INC.



Principal Place of Business

**5855 COPLEY DR
SAN DIEGO, CA 92111 US**

Mailing Address

**2700 SANDERS RD
TAX DEPT-25
PROSPECT HEIGHTS, IL 60070 US**



04132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 33-0578610	Applied For Not Applicable
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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**

**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, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PDCR
NAME	HAINES, JOHN J
STREET ADDRESS	5855 COPLEY DR
CITY-ST-ZIP	SAN DIEGO, CA 92111
TITLE	DEVP
NAME	HARMON, GARY S
STREET ADDRESS	5855 COPLEY DR
CITY-ST-ZIP	SAN DIEGO, CA 92111
TITLE	VSGC
NAME	WOOD, JEFFREY B
STREET ADDRESS	2700 SANDERS RD
CITY-ST-ZIP	PROSPECT HEIGHTS, IL 60070
TITLE	VPT
NAME	COPPENATH, JOAN M
STREET ADDRESS	5855 COPLEY DR
CITY-ST-ZIP	SAN DIEGO, CA 92111
TITLE	AS
NAME	ANGELO, JOSEPH M
STREET ADDRESS	2700 SANDERS ROAD
CITY-ST-ZIP	PROSPECT HEIGHTS, IL 60070
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Joseph M. Angelo 4-16-07 847.564.6058
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #