

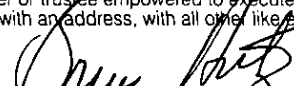
**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 03, 2001 8:00 am**  
**Secretary of State**

05-03-2001 90949 045 \*\*\*150.00

**C0058582**

DO NOT WRITE IN THIS SPACE

|   |  |  |   |
|---|--|--|---|
| <b>DOCUMENT # F94000005834</b><br>1. Entity Name<br><b>The Money Store Auto Finance Inc.</b>  |  |  |   |
| Principal Place of Business<br><b>707 3rd Street<br/>West Sacramento CA 95605</b>   |  | Mailing Address<br><b>Legal Department<br/>707 3rd Street<br/>West Sacramento CA 95605</b>   |   |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.   |  | 3. Mailing Address<br>Suite, Apt. #, etc.  |   |
| City & State  |  | City & State   |   |
| Zip   | Country  | Zip  | Country   |
| 4. FE Number <b>22-3331186</b>  |  | Applied For<br>Not Applicable  |   |
| 5. Certificate of Status Desired <input type="checkbox"/>   |  | \$8.75 Additional Fee Required   |   |
| 6. Name and Address of Current Registered Agent<br><b>Corporation Service Company<br/>1201 Hays Street<br/>Tallahassee, FL 32301</b>  |  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> 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.   |  |  |   |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small> DATE _____  |  |  |   |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/><br>(See criteria on back)  |  | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees                 |   |
| 11. OFFICERS AND DIRECTORS  |  | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>President/Director</b> <input type="checkbox"/> Delete<br><b>Mark Hudson</b><br><b>4837 Watt Ave.</b><br><b>North Highlands CA 95660</b>      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>Secretary</b> <input type="checkbox"/> Delete<br><b>Charles L. Terribile</b><br><b>301 S. College St.</b><br><b>Charlotte NC 28288</b>        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>Treasurer</b> <input type="checkbox"/> Delete<br><b>Arthur Q. Lyon</b><br><b>707 3rd Street</b><br><b>West Sacramento CA 95605</b>            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>Director</b> <input type="checkbox"/> Delete<br><b>Robert V. Burton</b><br><b>201 South College St.</b><br><b>Charlotte NA 28288</b>          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>Senior Vice President</b> <input type="checkbox"/> Delete<br><b>Bruce Hurwitz</b><br><b>707 3rd Street</b><br><b>West Sacramento CA 95605</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. |  |  |   |
| SIGNATURE:   |  | Bruce Hurwitz<br>Senior vice President 4/18/01 (916) 617-2610  |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |  | Date Daytime Phone #   |   |

CR2E034 (11/00)

Attachment Doc # F94000005834

**THE MONEY STORE AUTO FINANCE INC. C0058582**  
**LIST OF PRINCIPAL OFFICERS AND DIRECTORS**

Officers:

Mark Hudson, President  
707 3<sup>rd</sup> Street  
West Sacramento, CA 95605

Charles L. Terrible, Senior Vice President/Secretary  
301 South College Street, 32<sup>nd</sup> Floor  
Charlotte, NC 28288-0630

Arthur Q. Lyon, Senior Vice President/Treasurer/CFO  
707 3<sup>rd</sup> Street  
West Sacramento, CA 95605

Bruce Hurwitz, Senior Vice President/Assistant Secretary  
707 3<sup>rd</sup> Street  
West Sacramento, CA 95605

Directors

Mark Hudson  
4837 Watt Ave.  
North Highlands, CA 95660

Robert V. Burton  
201 South College Street  
16<sup>th</sup> Floor  
Charlotte, NC 28288

Term: All Officers and Directors are elected to serve until their successors are duly elected.