

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001320

FILED
May 04, 2004
Secretary of State

Entity Name: WFS FINANCIAL INC.

Current Principal Place of Business:

23 PASTEUR ROAD
ATTN LEGAL DEPT
IRVINE, CA 92718

New Principal Place of Business:

Current Mailing Address:

23 PASTEUR ROAD
ATTN LEGAL DEPT
IRVINE, CA 92718

New Mailing Address:

FEI Number: 33-0291646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: RADY, ERNEST S
Address: 23 PASTEUR ROAD
City-St-Zip: IRVINE, CA 92618

Title: CEO () Delete
Name: WHATCOTT, LEE A
Address: 23 PASTEUR ROAD
City-St-Zip: IRVINE, CA 92618

Title: D () Delete
Name: DOWLAN, JAMES R
Address: 32 CALLENDAR CT
City-St-Zip: LAGUNA NIGUEL, CA 92677

Title: PCEO () Delete
Name: WOLFE, THOMAS
Address: 23 PASTEUR ROAD
City-St-Zip: IRVINE, CA 92618

Title: EVP () Delete
Name: MARTIN, DAWN
Address: 23 PASTEUR
City-St-Zip: IRVINE, CA 92618

Title: D () Delete
Name: BARDWICK, JUDITH
Address: 1389 CAMINITO HALAGO
City-St-Zip: LA JOLLA, CA 92037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS A. WOLFE

PCEO

05/04/2004

Electronic Signature of Signing Officer or Director

_____ Date