2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000006185

Entity Name: HSBC AUTO FINANCE INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5855 COPLEY DR SAN DIEGO, CA 92111 US **Current Mailing Address: New Mailing Address:** HSBC FINANCE CORPORATION TAX DEPT 1 SW METTAWA, IL 60045 US FEI Number: 33-0682821 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** () Delete Title: **PCFO** (X) Change () Addition Name: MARTIN, T.J. Name: TANKERSLEY, A J 5855 CAPLEY DR 5855 CAPLEY DR Address: Address: SAN DIEGO, CA 92111 City-St-Zip: SAN DIEGO, CA 92111 City-St-Zip: Title: DEVP Title: DEVP () Delete (X) Change () Addition TANKERSLY, A J Name: HARMAN, GARY S Name: 5855 COPLEY DR 5855 COPLEY DR Address: Address: SAN DIEGO, CA 92111 City-St-Zip: City-St-Zip: SAN DIEGO, CA 92111 Title: AS () Delete Title: () Change () Addition

Title: VPT () Delete COPPEMATH, JOAN M Name: Address: 5885 COPLEY DR

ANGELO, JOSEPH M

METTAWA, IL 60045

SAN DIEGO, CA 92111

26525 N. RIVERWOODS BLVD.

Name:

Address:

City-St-Zip:

City-St-Zip:

COPPENRATH, JOAN M Name: Address: 5885 COPLEY DR

(X) Change () Addition

City-St-Zip: SAN DIEGO, CA 92111

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Title:

Address:

City-St-Zip:

SIGNATURE: JOSEPH M ANGELO ASST 04/20/2009