

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001513

FILED
Mar 26, 2012
Secretary of State

Entity Name: HELLER FIRST CAPITAL CORP.

Current Principal Place of Business:

635 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

New Principal Place of Business:

Current Mailing Address:

901 MAIN AVENUE
ATTN: LEGAL DEPT.
NORWALK, CT 06851

New Mailing Address:

FEI Number: 36-3804034 **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

OFFICERS AND DIRECTORS:

Title: P
Name: BURGER, ALEC
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

Title: VP
Name: DUFFEK, WILLIAM R
Address: 635 MARYVILLE CENTRE DRIVE
City-St-Zip: ST. LOUIS, MO 63141

Title: T
Name: SARTORI, SUZANNE R
Address: 635 MARYVILLE CENTRE DRIVE
City-St-Zip: ST. LOUIS, MO 63141

Title: AS
Name: RODRIGUEZ, LUCY
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 068515

Title: D
Name: ROWAN, MICHAEL G
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

Title: AS
Name: HARRISON, AIMEE J
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

I hereby 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 all other like empowered.

SIGNATURE: AUTHORIZE FILER

AF

03/26/2012

Electronic Signature of Signing Officer or Director

Date