## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # FQ70000027

1. Corporation GENERA	ON Name  AL MOTORS ACCEPTANCE							
Principal Place of Business Mailing Address						- I TRACTORA TÂTA TOUT TOUTH DOSHI BOSHE O	DIIK BURK BUKKU KUKA 1801	( <b>00</b> 1011 1 <b>00</b> ) ( <b>00</b> )
3044 W GRAND BLVD DETROIT MI 48202 DETROIT MI 48202			D .				•	
						DO NOT WRITE	IN THIS SPACE	
						3. Date Incorporated or Qualifed 04/18/1997	-	
Principal Place of Business     2a. Mailing Address			;			4. FEI Number		Applied For
21						38-0572512	<u> </u>	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			c.				\$8.75	Additional
27						5. Certificate of Status Desired	1 '	Required
City & State City & State 28			е			6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	Cou	ntry	•	8. This corporation owes the current	T 1971	
24	25 29					Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Reg	istered Agent	
C T	CODDODATION OVOTEN			81	Name			
C.T. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			:	82	Street Addre	ess (P.O. Box Number is Not Acceptable	)	
PLANTATION FL 33324				83			11 761 12.10 (94 . 44) 12 401 176, 1121 121	ed de kongreden. Die stekke 1920 in 188
				84	City			Code
	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.					pration submits this statement for the pur in's board of directors. I hereby accept the	pose of changing it e appointment as r	ts registered registered
SIGNATURE	`							
12.	Signature, typed or printed name of registered age	ND DIRECTORS	(NOTE: Registered	Agen	t signature required		DATE	
TITLE	DCPR	DELE				ADDITIONS/CHANGES TO OFFICE		
NAME .	FINNEGAN, JOHN D.					$e_{i}$ , $e_{i}$	☐ Change	Addition
STREET ADDRESS	3044 W GRAND BLVD		1.2 NA					
	DETROIT MI 48202		1		ADDRESS			
CITY-ST-ZIP	D	☐ DELE	1.4 CIT		r-ZIP			
NAME	CLOUT, RICHARD J S	L. DELE	I				Change	☐ Addition
STREET ADDRESS	3044 W GRAND BLVD		2.2 NA					
CITY-ST-ZIP	DETROIT MI 48202	, to the terms of			ADDRESS			
TITLE	VP	☐ DELET	2. 4 CI	_	T-ZJP		Channe	
NAME	BULL, PAUL D	r i i i i i i i i i i i i i i i i i i i	3.2 NA				Change	☐ Addition
STREET ADDRESS	3044 W GRAND BLVD	, , , ,			ADDDEGG		•	
CITY-ST-ZIP	DETROIT MI 48202	•			ADORESS		機能 漏門機能	
TITLE	DV	☐ DELET	3.4. CIT E 4.1 TITI		1-4IP		Stra & Change	Addition
NAME GIVE	GIBSON, JOHN E		4.2 NA				· · · · · · · · · · · · · · · · · · ·	[:::] Addiabli
STREET ADDRESS	3044 W GRAND BLVD				ADDRESS .	•		
CITY-ST-ZIP	DETROIT MI 48202	• *						}
TITLE '	S	☐ DELET	4.4 CIT E 5.1 TITI		* LH*		Change	☐ Addition
NAME	QUENNEVILLE, CATHY L.		5.2 NA			* · · · · · · · · · · · · · · · · · · ·	- La Charige	☐ ₩OOKON
STREET ADDRESS					ADDRESS	· ·		į.

14. 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 annual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, \$\mathscr{g}\$ or an attackment with an address, with all other like empowered. on an attachment with an address, with all other like empowered.

6.2 NAME

5.4 CITY-ST-ZIP 6.1 TITLE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAMÈ

**DETROIT MI 48202** 

HAUSEMAN, SUSAN G

3044 W GRAND BLVD

**DETROIT MI 48202** 

☐ DELETE

PEQUIRETA. M. Carrera, Assistant Secretary 1/12/99

**FILED** 

Feb 01, 1999 8:00am

**Secretary of State** 

02-01-1999 90025 034 \*\*\*150.00

Addition

☐ Change