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2001 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2001 8:00 am DOCUMENT # F97000002283 **Secretary of State** HOUSEHOLD AUTOMOTIVE CREDIT CORPORATION 02-19-2001 90017 018 ***150.00 Principal Place of Business Mailing Address 11452 EL CAMINO REAL 2700 SANDERS ROAD ATTN: TAX DEPARTMENT - 25 SAN DIEGO CA 92130 PROSPECT HEIGHTS IL 60070 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 33-0751304 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition Change TITLE □ Delete TITLE Vella, John A. NAME STEWART, R.M. NAME 2700 SANDERS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PROSPECT HEIGHTS IL 60070 CITY-ST-7IP TITLE ☐ Addition TITLE Delete ☐ Change MOSS, BENJAMIN B JR NAME NAME 2700 SANDERS RD STREET ADDRESS STREET ADDRESS CITY-ST-7IP PROSPECT HEIGHTS IL 60070 CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE MORELLI, P.J. NAME NAME STREET ADDRESS 2700 SANDERS ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PROSPECT HEIGHTS IL 60070 Assistant Secretary Angelo, Joseph M. Delete TITLE TITLE ☐ Change Addition NAME SIKES, M.D. NAME 2700 SANDERS ROAD STREET ADDRESS 2700 SANDERS ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PROSPECT HEIGHTS IL 60070 PROSPECT HEIGHTS IL 60070 TITLE ☐ Delete TITLE Change ☐ Addition BANGS, LAWRENCE N NAME STREET ADDRESS 2700 SANDERS RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PROSPECT HEIGHTS IL 60070 TITLE DVP ☐ Delete Change Addition DELUCA, MICHAEL A NAME NAME STREET ADDRESS 2700 SNADERS ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PROSPECT HEIGHTS IL 60070 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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR