2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002446

Entity Name: CNH AMERICA LLC

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 700 STATE ST RACINE, WI 53404 RACINE, WI 53404 **Current Mailing Address: New Mailing Address:** 700 STATE ST C/O CNH TAX DEPT RACINE, WI 53404 700 STATE ST RACINE, WI 53404 FEI Number: 76-0433811 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: MGRM (X) Change () Addition () Delete FIATA LLIS NORTH AME, RICA, INC. CASE NEW HOLLAND INC, . Name: Name: Address: 700 STATE STREET Address: 700 STATE STREET City-St-Zip: RACINE, WI 53404 City-St-Zip: RACINE, WI 53404 Title: Title: MGR () Change (X) Addition () Delete BOYANOVSKY, HAROLD Name: Name: Address: Address: 700 STATE STREET City-St-Zip: City-St-Zip: RACINE, WI 53404 Title: () Delete Title: MGR () Change (X) Addition LECOMTE, MICHEL Name: Name: 700 STATE STREET Address: Address: City-St-Zip: City-St-Zip: RACINE, WI 53404 Title: () Delete Title: MGR () Change (X) Addition Name: Name: ROSSOTTO, CAMILLO 700 STATE STREET Address: Address: RACINE, WI 53404 City-St-Zip: City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition ROBERTO, MIOTTO Name: Name: 700 STATE STREET Address: Address: City-St-Zip: City-St-Zip: RACINE, WI 53404 Title: () Delete Title: () Change (X) Addition COSTA, DONALD Name: Name: Address: Address: 700 STATE STREET RACINE, WI 53404 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DONALD COSTA MGR 04/11/2006