


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P02509 1. Entity Name CHASE AUTO FINANCE CORP.	
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Principal Place of Business 900 STEWART AVE. 6TH FL GARDEN CITY, NY 11530 US	Mailing Address 900 STEWART AVE. 6TH FL GARDEN CITY, NY 11530 US
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04112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-2690123	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POWELL, SCOTT 270 PARK AVE NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JERRY DEROJAS 900 STEWART AVENUE GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LANGAN, ANTHONY 900 STEWART AVENUE GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JEFFREY LEVINE 900 STEWART AVE GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANTHONY LANGAN 900 STEWART AENUE GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HABER, JOAN 900 STEWART AVE. GARDEN CITY, NY 11531

U00000529489
05/05/06-80079-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Joan Haber V.P. 4/12/06 516-745-4067
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
JOAN HABER