

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

FILED
Aug 03, 1999 8:00 am
Secretary of State

08-03-1999 90001 007 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---

DOCUMENT # P07323

1. Corporation Name

AT&T CREDIT HOLDINGS

Principal Place of Business 555 California St San Francisco, CA 94104	Mailing Address 555 California St ^{4th FLOOR} San Francisco, CA 94104
---	---

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/06/1985	4. FEI Number 13-3240679	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No

21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	22. Mailing Address Suite, Apt. #, etc. City & State Zip Country
---	---

9. Name and Address of Current Registered Agent

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Hesselink, Ann P. 44 Whippany Road Morristown, NJ	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C Prendergast, S L One Oak Way Berkeley Heights, NJ	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AVP Gaines, Michael A. 44 Whippany Road Morristown, NJ	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP Andrews, Edward W Jr 44 Whippany Road Morristown, NJ	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Walsh, Florence L 295 North Maple Ave Basking Ridge, NJ	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Wasser, Marilyn J. 400 Interface Parkway Parsippany NJ	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	VP/D Brecher, Ephraim M. 412 Mount Kemble Avenue Morristown, NJ	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	C/D Dwyer, Edward M 295 North Maple Ave. Basking Ridge, NJ	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	VP/D Cyprus, Nicholas S. 295 North Maple Ave. Basking Ridge, NJ	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	D Cinali, M.J. 295 North Maple Ave. Basking Ridge, NJ	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	T Harris, Errol A. One Oak Way Berkeley Heights, NJ	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	S Wasser, Marilyn J. 131 Morristown Road Basking Ridge, NJ 07920	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Antoinette A. Duah **Antoinette A. Duah** 5/28/99 (973) 644-1224
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

PO7323
599868-90001-7

AT&T CREDIT HOLDINGS, INC.

Election Date 10/20/1998 FEIN 13-3240679

ELECTED CORPORATION OFFICERS AND DIRECTORS

TITLE / NAME	BUSINESS ADDRESS
Assistant Secretary G. Ackerman	
Assistant Secretary Antoinette A. Duah	412 Mt. Kemble Avenue Room S287 Morristown, NJ 07960
Assistant Secretary L. B. Fontana, Jr.	
Assistant Secretary H. Hewen	
Assistant Secretary Jeff Tutnauer	412 Mt. Kemble Avenue Room C250 Morristown, NJ 07960
Assistant Secretary Gary Wiggins	412 Mt. Kemble Ave. Room S209 Morristown, NJ 07960
Assistant Treasurer D. Barach	295 N. Maple Avenue Room 7145L3 Basking Ridge, NJ 07920

DIRECTORS

Director Ephraim M. Brecher	412 Mt. Kemble Avenue, PO Box 1995 Room S267 Morristown, NJ 07962-1995
Director M.J. Cinali	295 North Maple Ave. Rm.4428D2 Basking Ridge, NJ 07920-1002
Director Nicholas S. Cyprus	295 N. Maple Avenue Room 1232M3 Basking Ridge, NJ 07920-1002
Director Edward M. Dwyer	295 N. Maple Ave Basking Ridge, NJ 07920