2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2012
Secretary of State

DOCUMENT# P10069

Entity Name: DEERE CREDIT SERVICES, INC.

Current Principal Place of Business:

6400 NW 86TH STREET
JOHNSTON, IA 50131 US

New Principal Place of Business:

Current Mailing Address:

ONE JOHN DEERE PLACE
DEERE & CO TAX DEPT
MOLINE, IL 61265 US

New Mailing Address:

FEI Number: 36-3423266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SVP
Name: HESEMAN, JAMES R
Address: 6400 NW 86TH ST
City-St-Zip: JOHNSTON, IA 50131 US

Title: AT
Name: SPITZFADEN, THOMAS
Address: ONE JOHN DEERE PLACE
City-St-Zip: MOLIE, IL 61265 US

Title: PD
Name: ISRAEL, JAMES A
Address: 6400 NW 86TH ST
City-St-Zip: JOHNSTON, IA 50131 US

Title: AS
Name: JARRETT, THOMAS K
Address: ONE JOHN DEERE PLACE
City-St-Zip: MOLINE, IL 61265 US

Title: S
Name: NOE, GREGORY
Address: ONE JOHN DEERE PLACE
City-St-Zip: MOLINE, IL 61265 US

Title: SVP
Name: SIDWELL, LAWRENCE W
Address: 6400 NW 86TH STREET
City-St-Zip: JOHNSTON, IA 50131 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS K. JARRETT AS 04/04/2012

Electronic Signature of Signing Officer or Director Date