

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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**95 MAY -1 AM 8:49**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**800001482028  
-05/10/95--01012--001  
\*\*\*2000.00 \*\*\*\*200.00**

**CORPORATION ANNUAL REPORT 1995**

FLORIDA DEPARTMENT OF STATE  
Sandra B. Morfitt  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P12283 (8) 990**

1. Corporation Name  
**GENERAL ELECTRIC REAL ESTATE CREDIT CORPORATION**

Principal Place of Business: **280 LONG RIDGE RD. P.O. BOX 8109 STAMFORD CT 06927**

Mailing Address: **280 LONG RIDGE RD. P.O. BOX 8109 STAMFORD CT 06927**

DO NOT WRITE IN THIS SPACE

|                                                 |                     |                                                        |                                |
|-------------------------------------------------|---------------------|--------------------------------------------------------|--------------------------------|
| 2. Principal Place of Business                  | 2a. Mailing Address | 3. Date incorporated or Qualified                      | 3a. Date of Last Report        |
| 21                                              | 26                  | 11/24/1986                                             | 03/07/1994                     |
| 22                                              | 27                  | 4. FEI Number                                          | Applied For                    |
| 23                                              | 28                  | 13-2771827                                             | Not Applicable                 |
| 24                                              | 29                  | 5. Certificate of Status Desired                       | \$8.75 Additional Fee Required |
| 25                                              | 30                  | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees    |
| 9. Name and Address of Current Registered Agent |                     | 10. Name and Address of New Registered Agent           |                                |

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

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: \_\_\_\_\_ DATE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                     | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                   |
|----------------------------|---------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE                      | V                   | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | SANTORO, EDWARD J   | 1.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 777 LONG RIDGE ROAD | 1.3 STREET ADDRESS                                    |                                                                   |
| CITY, ST, ZIP              | STAMFORD CT         | 1.4 CITY, ST, ZIP                                     |                                                                   |
| TITLE                      | S                   | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | KLOSTER, B.J., JR.  | 2.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 280 LONG RIDGE ROAD | 2.3 STREET ADDRESS                                    |                                                                   |
| CITY, ST, ZIP              | STAMFORD CT         | 2.4 CITY, ST, ZIP                                     |                                                                   |
| TITLE                      | T                   | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | WERNER, J S         | 3.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 777 LONG RIDGE ROAD | 3.3 STREET ADDRESS                                    |                                                                   |
| CITY, ST, ZIP              | STAMFORD CT         | 3.4 CITY, ST, ZIP                                     |                                                                   |
| TITLE                      | D                   | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | WENDT, GARY C       | 4.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 280 LONG RIDGE RD   | 4.3 STREET ADDRESS                                    |                                                                   |
| CITY, ST, ZIP              | STAMFORD CT         | 4.4 CITY, ST, ZIP                                     |                                                                   |
| TITLE                      |                     | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                     | 5.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                     | 5.3 STREET ADDRESS                                    |                                                                   |
| CITY, ST, ZIP              |                     | 5.4 CITY, ST, ZIP                                     |                                                                   |
| TITLE                      |                     | 6.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                     | 6.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                     | 6.3 STREET ADDRESS                                    |                                                                   |
| CITY, ST, ZIP              |                     | 6.4 CITY, ST, ZIP                                     |                                                                   |

*See Separate Schedule*

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicates 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 as a change or as an attachment with an address.

**SIGNATURE:** \_\_\_\_\_ **ASSISTANT TREASURER STATE TAXES** 4/30/95

(910)

## GENERAL ELECTRIC REAL ESTATE CREDIT CORPORATION

### DIRECTORS

B. J. Kloster, Jr.  
D.J. Nayden  
J.A. Parke  
G.C. Wendt

### OFFICERS

G.C. Wendt  
D.J. Nayden  
J.A. Parke  
B.J. Kloster, Jr.

J.S. Werner  
J. P. Maffettone  
M.D. Fraizer  
R.E. Pfeiffer  
J.K. Alpert  
P.A. DeLuca  
W.P. Moore  
M.D. Kaplow  
J.J. Leibell  
F.A. Naemyth  
J.V. Ogden  
W. Brennan  
D.A. Flore  
K.E. Kempson  
R.J. Buckley  
K. Heindl  
O. Garza

Chairman of the Board and President  
President  
Vice President, Finance  
Senior Vice President, General Counsel and  
Secretary  
Vice President and Treasurer  
Vice President and Comptroller  
Vice President  
Vice President  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Treasurer-Taxes  
Assistant Treasurer-Taxes  
Assistant Treasurer-Taxes  
Assistant Treasurer-Taxes  
Assistant Treasurer-State Taxes  
Assistant Treasurer-State Taxes