2001 UNIFORM BUSINESS REPORT (UBR)

May 30, 2001 8:00 am Secretary of State **DOCUMENT # P24711** 1. Entity Name 05-30-2001 90025 004 ***550.00 THE CIT GROUP/SALES FINANCING, INC. Principal Place of Business Mailing Address AUU/104/ 650 CIT DRIVE 650 CIT DRIVE LIVINGSTON NJ 07039 LIVINGSTON NJ 07039 2. Principal Place of Business 3. Mailing Address Suite, Apt. # etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 13-6131491 Not Applicable Country Country Zip Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the State of Florida. signature, typed or printed name of registered agent and title if applicable. (NOTI Registered Agent signature required when reinstating) DATE FILE NOW!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 20 11 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payal le to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00 PD TITLE P/D TITLE Hallman /CEO EGAN, JAMES J., JR. NAME NAME TOM Drive STREET ADDRESS 650 CIT STREET ADDRESS 41 GATEHOUSE RD CITY-ST-ZIP CITY-ST-ZIP ivinaston BEDMINSTER NJ 07921 TITLE Delete TITLE V / D Change 🛣 Addition Schumm BAUERBAND, RICHARD NAME NAME maillium Drive STREET ADDRESS STREET ADDRESS 650 CIT 30 BEECH AVE 07039 CITY-ST-ZIP City-St-ZIP MADISON NJ 07940 ivinaston ☐ Change Addition Delete TITLE TITLE Schwam martin NAME NAME EDDY, FRED E 650 CIT Drive STREET ADDRESS STREET ADDRESS 12121 SIERRA ROAD CITY - ST - ZIP CITY-ST-ZIE vinaston NJ 07030 OKLAHOMA CITY OK 73162 Addition | TITLE TITLE VTCD Delete Kenneth Reynolds NAME NAME MOLLICA, VINCENT 650, CIT, DVIVE STREET ADDRESS STREET ADDRESS 1208 MOHEGAN ROAD CUTY-ST-ZIP CITY-ST-ZIE NJ 07039 ivinaston <u>MANASQUAN NJ 08736</u> [] Change Addition TITLE Delete TOTLE Eric Mandelbaum NAME CIFRESE, KAREN W. NAME STREET ADDRESS STREET ADDRESS 18110 WESTVIEW 650 CIT , Drive CITY-ST-ZIP CITY-ST-ZIP 07039 <u>Wharton NJ 07885</u> X Addition TITLE Delete TITLE Beroza NAME COFER, JAMES L. Anne STREET ADDRESS STREET ADDRESS 38 PARK ST UNIT A CITY-ST-ZIP CITY-ST-ZIP 07D39 FLORHAM PARK NJ 07932 <u>PNIVI-</u>

of the corporation of the receiver or trustee empowered to execute this reprichanged, or on an attachment with an address, with an other like empowere

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICE R OR DIRECTOR

I hereby certify that the information supplied with this filling does not qualify or the exemption stated in Section 149.07(3)(i), 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 exclude this reput as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

973-740-5cco