

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

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Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P27751** (7)

1. Corporation Name
FINANCIAL FEDERAL CREDIT INC.



Principal Place of Business 7870 WOODWAY HOUSTON TX 07666 US	Mailing Address 400 PARK AVE. 8TH FLOOR NEW YORK NY 10022-4406 US
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3. Date Incorporated or Qualified 01/17/1990	3a. Date of Last Report 01/25/1996
4. FEI Number 76-0272000	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 1300 Post Oak Boulevard	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Suite 1300	27
City & State	City & State
23 Houston, TX	28
Zip	Zip
24 77056	30
Country	Country
25 U.S.	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
	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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	P/D ☒ Change ☐ Addition
NAME	SINSHEIMER, PAUL	1.2 NAME	
STREET ADDRESS	6200 VALLEY FORGE	1.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX	1.4 CITY-ST-ZIP	77057
TITLE	V ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	GALLAGHER, WILLIAM M.	2.2 NAME	
STREET ADDRESS	7715 HIGHMEADOW	2.3 STREET ADDRESS	21314 Crystal Greens
CITY-ST-ZIP	HOUSTON TX	2.4 CITY-ST-ZIP	Katy, TX
TITLE	S ☒ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME	BRANDOFF, MARK A.	3.2 NAME	Geisser, Troy H.
STREET ADDRESS	212 HALSEY	3.3 STREET ADDRESS	25 Knollwood Drive
CITY-ST-ZIP	JERICHO NY	3.4 CITY-ST-ZIP	Livingston, NJ
TITLE	T ☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	PALITZ, MICHAEL C.	4.2 NAME	
STREET ADDRESS	173 RIVERSIDE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	4.4 CITY-ST-ZIP	07039
TITLE	D ☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	PALITZ, CLARENCE Y., JR.	5.2 NAME	
STREET ADDRESS	650 OLD ALLAMUCHY ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	ALLAMUCHY NJ	5.4 CITY-ST-ZIP	10024
TITLE	D ☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	PALITZ, BERNARD G.	6.2 NAME	
STREET ADDRESS	212 EAST 68TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	6.4 CITY-ST-ZIP	07820

14. I do 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.

SIGNATURE:  **Troy H. Geisser, Secretary (212) 888-3344 4/11/97**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date Daytime Phone 0004441

CR2E034 (9/96)