

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

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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P28236 (8)**
1. Corporation Name
AT&T CREDIT CONSUMER FINANCE CORPORATION



Principal Place of Business: **44 WHIPPANY ROAD MORRISTOWN NJ 07960**
Mailing Address: **44 WHIPPANY ROAD MORRISTOWN NJ 07960**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/23/1990	3a. Date of Last Report 05/01/1995
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 22-3014155	Applied For <input type="checkbox"/> Not Applicable
23. Zip	25. Country	29. Zip	30. Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code FL
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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: _____
Signature typed or printed in block below. Signature must be typed in block. (NOTE: Registered Agent signature required when incorporating.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLD, GERRI A	1.2 NAME	
STREET ADDRESS	44 WHIPPANY RD	1.3 STREET ADDRESS	Please See Attached
CITY-ST-ZIP	MORRISTOWN NJ	1.4 CITY-ST-ZIP	
TITLE	CFOT <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	OLIU, RAMON JR	2.2 NAME	
STREET ADDRESS	2 GATEWAY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MORRISTOWN NJ	2.4 CITY-ST-ZIP	
TITLE	VGM <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, CONSTANCE G	3.2 NAME	
STREET ADDRESS	2 GATEWAY DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PARISIPPANY NJ	3.4 CITY-ST-ZIP	
TITLE	CCS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRUMP, DOUGLAS P	4.2 NAME	
STREET ADDRESS	2 GATEWAY DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PARSIPPANY NJ	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITTAKER, CHARLES S JR	5.2 NAME	
STREET ADDRESS	44 WHIPPANY ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	MORRISTOWN NJ	5.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCARTHY, G. DANIEL	6.2 NAME	
STREET ADDRESS	44 WHIPPANY RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	MORRISTOWN NJ	6.4 CITY-ST-ZIP	

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 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: *Mark P. Brower* **Mark P. Brower** **4/23/96** **201-397-3000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE (Date of Filing)

CR2E034 (12/95)

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AT&T CREDIT CONSUMER FINANCE CORPORATION
(f/k/a AT&T Vehicle Leasing Corporation)

Effective Date: 10/15/95

FEIN #: 22-3014155

OFFICERS

NAME & SS#	TITLE	BUSINESS ADDRESS	RESIDENTIAL ADDRESS
Gerri A. Gold 070-38-6264	President	44 Whippany Road Morristown, NJ 07962-1983	24 Smoke Rise Road Bedminster, NJ 07921
Ramon Oliu, Jr. 140-52-5818	Chief Financial Officer and Treasurer	44 Whippany Road Morristown, NJ 07962-1983	279 Bloomsbury Road Milford, NJ 08848
Constance G. Martin 140-40-2518	Vice President and General Manager	2 Gatehall Drive Parsippany, NJ 07054	363 Mt. Airy Road Basking Ridge, NJ 07920
Douglas P. Trump 195-36-5669	Chief Counsel and Secretary	2 Gatehall Drive Parsippany, NJ 07054	15 Inwood Road Westfield, NJ 07090
G. Daniel McCarthy 212-54-1128	Assistant Secretary	44 Whippany Road Morristown, NJ 07962-1983	82 Van Doren Avenue Chatham, NJ 07928
Robert J. Ingato 156-54-4928	Assistant Secretary	44 Whippany Road Morristown, NJ 07962-1983	23 Phylliss Place Randolph, NJ 07869
Madelyn C. Law 361-22-4766	Assistant Secretary	44 Whippany Road Morristown, NJ 07962-1983	Broadview Terrace Chatham, NJ 07928
Glen J. Dumont 148-56-6308	Assistant Secretary	44 Whippany Road Morristown, NJ 07962-1983	650 Boulevard Westfield, NJ 07090
Glen A. Votek 136-52-5671	Assistant Treasurer	44 Whippany Road Morristown, NJ 07962-1983	3 Kent Court Annandale, NJ 08801
Michael A. Gaines 138-56-9625	Asst. Vice President Income Taxes	44 Whippany Road Morristown, NJ 07962-1983	30 McBride Way Bridgewater, NJ 08807
Mark P. Brower 153-42-2206	Asst. Vice President Tax Operations	44 Whippany Road Morristown, NJ 07962-1983	19 Larissa Lane Thornwood, NY 10594

DIRECTORS

NAME & SS#	BUSINESS ADDRESS	RESIDENTIAL ADDRESS
Gerri A. Gold 070-38-6264	44 Whippany Road Morristown, NJ 07962	24 Smoke Rise Road Bedminster, NJ 07921
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