

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

**FILED**  
**May 17, 1999 8:00 am**  
**Secretary of State**

05-17-1999 90027 018 \*\*\*150.00

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>	<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT #** P28236

1. Corporation Name

AT&T Credit Consumer Finance Corporation

<b>Principal Place of Business</b> 2 Gatehall Drive Parsippany, NJ 07054	<b>Mailing Address</b> 2 Gatehall Drive Parsippany, NJ 07054
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
02/23/1990

2. Principal Place of Business 21 2 Gatehall Drive	2a. Mailing Address 26 2 Gatehall Drive
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4. FEI Number 22-3014155	Applied For Not Applicable
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Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State 23 Parsippany, NJ	City & State 28 Parsippany, NJ
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6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip 24 07054	Country 25 USA	Zip 29 07054	Country 30 USA
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8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation Systems  
1200 South Pine Island Road  
Plantation, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	Please See Attached	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Please See Attached	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I 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, with all other like empowered.

**SIGNATURE:** *Louis DeRosa* **4/29/99** **913-606-3500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**AT&T Credit Consumer Finance Corporation**  
**FEIN: 22-3014155**

<u>DIRECTORS</u>	<u>TITLE</u>	<u>SS#</u>	<u>BUSINESS ADDRESS</u>
David F. Banks	Director	263-66-2947	2 Gatehall Drive Parsippany, NJ 07054
Daniel A. Jauemig	Director	472-938-562	2 Gatehall Drive Parsippany, NJ 07054
Bradley D. Nullmeyer	Director	462-73-1076	2 Gatehall Drive Parsippany, NJ 07054
<u>OFFICERS</u>			
Steven K. Hudson	CEO	456-32-0456	2 Gatehall Drive Parsippany, NJ 07054
Bradley D. Nullmeyer	President	462-73-1076	2 Gatehall Drive Parsippany, NJ 07054
Robert J. Ingato	Executive Vice President	156-54-4928	2 Gatehall Drive Parsippany, NJ 07054
Daniel A. Jauemig	Ex. VP and CFO	472-938-562	2 Gatehall Drive Parsippany, NJ 07054
Sara R. McAuley	Ex VP - Corp Resource Officer	322-542482	2 Gatehall Drive Parsippany, NJ 07054
Glenn A. Votek	Ex VP and Treasurer	136-52-5671	2 Gatehall Drive Parsippany, NJ 07054
John G. Jakolev	Sr VP - Tax	434-62-5950	2 Gatehall Drive Parsippany, NJ 07054
Scott J. Moore	Sr. VP - Legal, Gen Counsel, and Sec.	160-56-2515	2 Gatehall Drive Parsippany, NJ 07054
Douglas P. Trump	Asst. Secretary	195-36-5669	2 Gatehall Drive Parsippany, NJ 07054
John C. Chobot	Asst. Secretary	109-38-6806	2 Gatehall Drive Parsippany, NJ 07054
John P. Stevenson	Asst. Secretary	426-09-5049	2 Gatehall Drive Parsippany, NJ 07054
Mark P. Brower	AVP - Tax	153-42-2206	2 Gatehall Drive Parsippany, NJ 07054
Louis J. Devico	Director of State and Local Tax	084-42-2467	2 Gatehall Drive Parsippany, NJ 07054

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