

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90091 010 ***150.00

DOCUMENT # P29558

1. Entity Name
HSBC REALTY CREDIT CORPORATION (USA)



Principal Place of Business

1 HSBC CENTER
27TH FLOOR
BUFFALO, NY 14203

Mailing Address

1 HSBC CENTER
27TH FLOOR
BUFFALO, NY 14203

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

01122006 Chg-P CR2E034 (11/05)

4. FEI Number
16-1370571

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME NAGLE, GERALD A
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Delete

TITLE EVP
NAME MALARKEY, CHARLES P
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Delete

TITLE SD
NAME WRIGHT, CRAIG N
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Delete

TITLE AT
NAME GRAHAM, TRICIA
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Delete

TITLE AS
NAME KUJAWA, HELEN
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Delete

TITLE D
NAME MCGREGOR, ROGER K
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME MCKENNA, JOHN J
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Change ☒ Addition

TITLE AS
NAME PICKEL, PAMELA A
STREET ADDRESS ONE HSBC CENTER
CITY-ST-ZIP BUFFALO, NY 14203 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Assistant Secretary

1-1806

716-841-4169

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #