

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31641

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** MITSUBISHI MOTORS CREDIT OF AMERICA, INC.

**Current Principal Place of Business:**

6400 KATELLA AVENUE  
CYPRESS, CA 90630

**New Principal Place of Business:**

**Current Mailing Address:**

6400 KATELLA AVENUE  
CYPRESS, CA 90630

**New Mailing Address:**

**FEI Number:** 33-0431467

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: YOUNG, JEFFREY  
Address: 6400 KATELLA AVE.  
City-St-Zip: CYPRESS, CA 90630

Title: SVPD  
Name: NAGAFUCHI, KOICHI  
Address: 6400 KATELLA AVE  
City-St-Zip: CYPRESS, CA 90630

Title: S  
Name: HALL, SUZANNE  
Address: 6400 KATELLA AVE  
City-St-Zip: CYPRESS, CA 90630

Title: TAS  
Name: KELLY, DENNIS M  
Address: 6400 KATELLA AVE  
City-St-Zip: CYPRESS, CA 90630

Title: FOD  
Name: BOOTH, DAN  
Address: 6400 KATELLA AVE.  
City-St-Zip: CYPRESS, CA 90630

Title: D  
Name: YOUNG, JEFFREY  
Address: 6400 KATELLA AVE  
City-St-Zip: CYPRESS, CA 90630

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY YOUNG

PCEO

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date