

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31725

FILED
Apr 26, 2007
Secretary of State

Entity Name: CREDIT ACCEPTANCE CORPORATION

Current Principal Place of Business:

25505 WEST 12 MILE RD
SUITE 3000
SOUTHFIELD, MI 480348339

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5070
SOUTHFIELD, MI 48086 US

New Mailing Address:

FEI Number: 38-1999511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCLUSKEY, KEITH
Address: 25505 W. 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

Title: DC () Delete
Name: FOSS, DONALD A
Address: 25505 W. 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

Title: CEOD () Delete
Name: ROBERTS, BRETT A
Address: 25505 W. 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

Title: T () Delete
Name: BUSK, DOUGLAS W
Address: 25505 W. 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

Title: CFO () Delete
Name: BOOTH, KENNETH S
Address: 25505 W 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

Title: S () Delete
Name: PEARCE, CHARLES A
Address: 25505 W. 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, STEVEN
Address: 25505 W. 12 MILE RD
City-St-Zip: SOUTHFIELD, MI 48034

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHARLES PEARCE

S

04/26/2007

Electronic Signature of Signing Officer or Director

_____ Date