

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90203 001 ****50.00
03-24-2006 90203 002 ***100.00

DOCUMENT # P36535

1. Entity Name
CITIFINANCIAL AUTO CREDIT, INC.



Principal Place of Business
2208 HIGHWAY 121
BEDFORD, TX 76021 US

Mailing Address
300 ST. PAUL PLACE
BSP17D- LEGAL DEPT.
BALTIMORE, MD 21202 US

66007024



01302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-2252996	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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	DP
NAME	MCDOWELL, MARY
STREET ADDRESS	2208 HIGHWAY #121
CITY-ST-ZIP	BEDFORD, TX 76021

TITLE	S
NAME	BAER, TERESA M
STREET ADDRESS	300 ST PAUL PLACE
CITY-ST-ZIP	BALTIMORE, MD 21202

TITLE	DT
NAME	PANEK, PAUL
STREET ADDRESS	2208 HIGHWAY #121
CITY-ST-ZIP	BEDFORD, TX 76021

TITLE	D
NAME	SATTERFIELD, DAVID
STREET ADDRESS	2208 HIGHWAY 121
CITY-ST-ZIP	BEDFORD, TX 76021

TITLE	VP
NAME	DAVIS, LINDA S
STREET ADDRESS	300 ST PAUL PLACE
CITY-ST-ZIP	BALTIMORE, MD 21202

TITLE	ASAT
NAME	CANEDY, K.A.
STREET ADDRESS	300 ST PAUL PLACE
CITY-ST-ZIP	BALTIMORE, MD 21202

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IN THIS SPACE**

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: K.A. Canedy K.A. Canedy 3/7/06 410-332-3067
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #