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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P38397** **(6)**

1. Corporation Name

USLI FLEET FINANCING, INC.

Principal Place of Business	Mailing Address
733 FRONT STREET SAN FRANCISCO CA 94111 US	733 FRONT ST MS 220 SAN FRANCISCO CA 94111 US

3. Date Incorporated or Qualified: **04/14/1992**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): County (30)

4. FEI Number: **94-3152596** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.,
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this 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) (Not Required if Agent is a natural person) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DUFF, JAMES G		1.2 NAME		
STREET ADDRESS	733 FRONT STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE	Secretary	☒ Change ☐ Addition
NAME	LERNER, HENRY		2.2 NAME		
STREET ADDRESS	733 FRONT STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		2.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	KEYES, ROBERT A.		3.2 NAME		
STREET ADDRESS	733 FRONT STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		3.4 CITY-ST-ZIP		
TITLE	T	☒ DELETE	4.1 TITLE	Sr. VP & CFO	☒ Change ☐ Addition
NAME	HAUSE, JOHN H		4.2 NAME	JOSEPH MAHONEY	
STREET ADDRESS	733 FRONT STREET		4.3 STREET ADDRESS	15 Lisa Lane	
CITY-ST-ZIP	SAN FRANCISCO CA		4.4 CITY-ST-ZIP	Moraga, CA 94556	
TITLE	S	☐ DELETE	5.1 TITLE	Asst. Secretary	☒ Change ☐ Addition
NAME	MASUKAWA, LLOYD		5.2 NAME		
STREET ADDRESS	733 FRONT STREEET		5.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	DUFF, JAMES G.		6.2 NAME		
STREET ADDRESS	733 FRONT STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: _____ 4/23/96 (415) 627-9715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Lloyd Masukawa, Asst. Secretary