

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 858078

Entity Name: GE COMMERCIAL FINANCE BUSINESS PROPERTY CORPORATION**Current Principal Place of Business:**901 MAIN AVENUE
NORWALK, CT 06851**Current Mailing Address:**901 MAIN AVENUE
NORWALK, CT 06851 US**FEI Number:** 91-1219984**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*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

Officer/Director Detail :

Title	VP	Title	VP
Name	CHANG, JOSEPHINE	Name	VONLANGEN, JOHN
Address	901 MAIN AVENUE	Address	901 MAIN AVENUE
City-State-Zip:	NORWALK CT 06851	City-State-Zip:	NORWALK CT 06851
Title	ASSISTANT SECRETARY	Title	ASSISTANT SECRETARY
Name	TAYLOR, JACQUELINE	Name	HAMILTON, KRYSTINA
Address	901 MAIN AVENUE	Address	901 MAIN AVENUE
City-State-Zip:	NORWALK CT 06851	City-State-Zip:	NORWALK CT 06851
Title	VP	Title	VP
Name	CARTER, DEREK	Name	VRON, VICTORIA
Address	901 MAIN AVENUE	Address	901 MAIN AVENUE
City-State-Zip:	NORWALK CT 06851	City-State-Zip:	NORWALK CT 06851
Title	SECRETARY	Title	TREASURER
Name	VRON, VICTORIA	Name	CHADWICK, ANA
Address	901 MAIN AVENUE	Address	901 MAIN AVENUE
City-State-Zip:	NORWALK CT 06851	City-State-Zip:	NORWALK CT 06851

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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: JACQUELINE TAYLOR**ASSISTANT SECRETARY** 05/27/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name CHADWICK, ANA
Address 901 MAIN AVENUE
City-State-Zip: NORWALK CT 06851

Title DIRECTOR
Name CHADWICK, ANA
Address 901 MAIN AVENUE
City-State-Zip: NORWALK CT 06851