| State of | of Rhode Island and Pro Office of the Secret | | Fee: \$50.00 | | | |
|--|--|---|--------------|--|--|--|
| HOPE | Division Of Busines 148 W. River S Providence RI 029 (401) 222-30 | treet 04-2615 | | | | |
| Foreign Business Corpora Annual Report Filing Period: January 1 - March 1 | ation | | | | | |
| In accordance with R.I.G.L. 7-1.2- annual report within thirty (30) day (c&d)) is subject to a penalty fee o | rs after the time prescribed by | | | | | |
| ANNUAL REPORT YEAR: 2016 | i | | | | | |
| 1. Corporate ID No. 00014 | -2338 | | | | | |
| 2. Name of Corporation <u>Ally Bank</u> | | | | | | |
| 3. Street Address Principal Business Office: | | | | | | |
| No. and Street:6985 UNION PARK CENTER, SUITE 435City or Town:MIDVALEState:UTZip:84047Country:USA | | | | | | |
| 4. Business Phone No. | | | | | | |
| 5. State of Incorporation | | | | | | |
| State: <u>UT</u> | | | | | | |
| 6. Brief Description of the Cha | racter of Business Conducte | ed in Rhode Island | | | | |
| PURCHASE CREDITWORT | | AND LEASE CONTRACTS | <u>FROM</u> | | | |
| 7. Names and Addresses of the Officers and Directors: All officers and directors must be listed. | | | | | | |
| Title | Individual Name | Address | | | | |
| SECRETARY | First, Middle, Last, Suffix | Address, City or Town, State, Zip Co 200 RENAISSANCE CE DETROIT, MI 48265 US/ | INTER | | | |
| CEO | DIANE E MORAIS | 440 S. CHURCH S CHARLOTTE, NC 28202 U | т | | | |
| CFO | JAMES N YOUNG | C/O 6986 UNION PARK CEN MIDVALE, UT 84047 US | ITER, 3435 | | | |
| ASSISTANT SECRETARY | BARBARA TAYLOR | 200 RENAISSANCE CE DETROIT, MI 48265 US/ | INTER | | | |

| DIRECTOR | WILLIAM F. MUIR | 200 RENAISSANCE CENTER DETROIT, MI 48265 USA | |
|----------|--------------------|---|--|
| DIRECTOR | FRANK H. SUITTER | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |
| DIRECTOR | DIANE E. MORAIS | 440 S. CHURCH CHARLOTTE, NC 28202 USA | |
| DIRECTOR | SCOTT NELSON | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84847 USA | |
| DIRECTOR | DENNIS F. GEER | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |
| DIRECTOR | WILLIAM E. MANNING | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |
| DIRECTOR | DARYL P. STUM | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |
| DIRECTOR | JAMES N YOUNG | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |
| DIRECTOR | JAY MEYERSON | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |
| DIRECTOR | DENNIS F GEER | C/O 6985 UNION PARK CENTER, #435 MIDVALE, UT 84047 USA | |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares Number of Shares | Total Issued and Outstanding <i>Num of</i> <i>Shares</i> |
|----------------|-----------------|---------------------|--|--|
| CWP | | \$0.0100 | 100,000.00 | 10990 |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 22 Day of December, 2015 at 3:52:55 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By BARBARA TAYLOR

Signature of Authorized Representative of the Corporation

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

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