



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

4 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 · This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

OO 400	HOUSEHOLD FINANCE CORPORATION II						
32409	110031	LITOLD FINANCE	CORPORATIONII				
3. Principal office address 1421 W. SHURE DR. STE 100			City ARLINGTON HEIGH	HTS State		Zip 60004	 J
4. Business Phone No. 224-880-7000			5. State of Incorporation DELAWARE				
6. Brief description of the charact CONSUMER FINANCE	er of busines	s conducted in Rhode Island	d Total				
LISTALL OFFICERS (NAME	S AND ADD	RESSES) ("X" BOX FOR A	TTACHMENT)			5.1731.51	
President Name KATHRYN MADISON			Vice-President Name JOHN P GRIFFIN				
Street Address 961 WEIGEL DR			Street Address 1421 W. SHURE DR. STE 100				
City ELMHURST	State	Zip 60126	City ARLINGTON HEIGI	HTS State		Zip 60004	, ,
Secretary Name LYNNE ZAREMBA			Treasurer Name JOHN P GRIFFIN				
Street Address 1421 W. SHURE DR. STE 100			Street Address 1421 W. SHURE DR. STE 100				
ARLINGTON HEIGHTS	State IL	Zip 60004	City ARLINGTON HEIGH	HEIGHTS State		Zip 60004	
LIST ALL DIRECTORS (NAM	ES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)				
Director Name KATHRYN MADISON			Director Name			2	
Street Address 961 WEIGEL DR			Street Address				
City ELMHURST	State IL	Zip 60126	City	State		Zip 20	BOS VI 3
Pirector Name	•		Director Name	<u> </u>		- co	7297 7397
Street Address	Street Address						
lity	State	Zip	City	State		Zip 🗸	₹
SHARES AUTHORIZED			10. SHARES ISSUED ("X"	BOX FOR AT	TACHMEN!	חַ	
		_	NUMBER OF SHARES CL	ASS/SERIES	PAF	VALUE	
his information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of Instruction sheet.			1022	СОММС	OMMON \$10		00
This report must be executed on t	behalf of the	corporation by an authorized st be executed on behalf of	d representative. If the corporation by the receive	ration is in the er or trustee.	hands of a r	eceiver o	r trustee,
File Date			Under penalty of perjury this report, including an and that all statements,	y accompany	ing schedul	les and s	tatements,
Check No		FILED	11/1/381			3/	2/16
FOR SECRETARY OF STATE U		44D A A 004	Signature of Authorized F	•			Date
	oc UNLI	MAR 0 9 2016	Print or Type Name of Au				
rm No. 630 vised: 01/2012		1//	1251	r			

HOUSEHOLD FINANCE CORPORATION II Directors & Officers

Director	Kathryn Madison		
President	Kathryn Madison		
Vice President - Treasurer & Controller	John P. Griffin		
Vice President & Secretary	Lynne Zaremba		
Vice President	Donald Scarcello		
Assistant Vice President & Assistant Secretary	Rose C. Mancini		
Assistant Vice President & Assistant Secretary	Bruce E. Gaddy		
Assistant Vice President	Joseph J. Kelly		
Assistant Vice President	Carin Rodemoyer		
Assistant Vice President	Phyllis I. Johnston		
Assistant Vice President	Isabel Pierri-Isabelle		
Assistant Vice President	Christina A. Kozaritz		
Assistant Vice President	Ashraf R. Ibrahim		
Assistant Vice President	Connie F. Rogers		
Assistant Vice President	Mark LoSacco		
Assistant Vice President	Megan L. Webster		
Assistant Vice President	Quandrea Fester		
Assistant Vice President	Angela Venator		
Assistant Vice President	Rhonda Nitsche		
Assistant Vice President	Jose Churruca		
Assistant Vice President	David Bertaut		
Assistant Treasurer	Rick L. Behnke		
Assistant Treasurer	James S. Stiegel		
Assistant Treasurer	Steven E. Smith		

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

