



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>			
3. Street Address Principal Business Office <b>2235 Route 70 West</b>			City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
4. Business Phone No. <b>856-488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>			6. SIC Code <b>8888</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>WHOLESALE AND RETAIL FINANCING</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Thomas J. Doll</b>			Vice President Name <b>Hideotoshi Kobayashi</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Secretary Name <b>Joseph T. Scharff</b>			Treasurer Name <b>Joseph T. Scharff</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Thomas J. Doll</b>			Director Name <b>Hideotoshi Kobayashi</b>		
Street Address <b>Same as above</b>			Street Address <b>same as above</b>		
City	State	Zip	City	State	Zip
Director Name <b>Joseph T. Scharff</b>			Director Name		
Street Address <b>Same as above</b>			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>25,000 COMM \$1.00 PAR VALUE</b>			<b>2,000</b>	<b>Common</b>	<b>\$1.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\*64753\*

File Date 1-25-05  
Check No. 139 0146  
By: R

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

**Joseph T. Scharff**

Print or Type Name of Officer

**Secretary and Treasurer**

Title of Officer

Date

1/10/05



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>			
3. Street Address Principal Business Office <b>2235 Route 70 West</b>			City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
4. Business Phone No. <b>856-488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>			6. SIC Code <b>8888</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>WHOLESALE AND RETAIL FINANCING</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Thomas J. Doll</b>			Vice President Name <b>Mamoru Aida</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Secretary Name <b>Joseph T. Scharff</b>			Treasurer Name <b>Joseph T. Scharff</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Thomas J. Doll</b>			Director Name <b>Mamoru Aida</b>		
Street Address <b>Same as above</b>			Street Address <b>Same as above</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Director Name <b>Joseph T. Scharff</b>			Director Name <b>Joseph T. Scharff</b>		
Street Address <b>Same as above</b>			Street Address <b>Same as above</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>25,000 COMM \$1.00 PAR VALUE</b>			<b>2,000</b>	<b>Common</b>	<b>\$1.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date **FEB 02 2004**  
Check No **112316874**  
By **BY**  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **Joseph T. Scharff** Date **1-27-04**

Print or Type Name of Officer  
**Joseph T. Scharff**

Secretary and Treasurer

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **64753** 2. Name of Corporation **Subaru Acceptance Corporation**  
3. Street Address Principal Business Office  
**2235 Route 70 West** City **Cherry Hill** State **NJ** Zip **08002**  
4. Business Phone No. **856-488-8500** 5. State of Incorporation **NEW JERSEY** 6. SIC Code **8888**

7. Brief Description of the Character of Business Conducted in Rhode Island

**Wholesale and retail financing**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>Thomas J. Doll</b> Street Address <b>2235 Route 70 West</b> City <b>Cherry Hill</b> State <b>NJ</b> Zip <b>08002</b>	Vice President Name <b>Mamoru Aida</b> Street Address <b>2235 Route 70 West</b> City <b>Cherry Hill</b> State <b>NJ</b> Zip <b>08002</b>
Secretary Name <b>Joseph T. Scharff</b> Street Address <b>2235 Route 70 West</b> City <b>Cherry Hill</b> State <b>NJ</b> Zip <b>08002</b>	Treasurer Name <b>Joseph T. Scharff</b> Street Address <b>2235 Route 70 West</b> City <b>Cherry Hill</b> State <b>NJ</b> Zip <b>08002</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Thomas J. Doll</b> Street Address <b>Same as above</b> City _____ State _____ Zip _____	Director Name <b>Mamoru Aida</b> Street Address <b>Same as above</b> City _____ State _____ Zip _____
Director Name <b>Joseph T. Scharff</b> Street Address <b>Same as above</b> City _____ State _____ Zip _____	Director Name _____ Street Address _____ City _____ State _____ Zip _____

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**25,000 COMM \$1.00 PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**2,000 Common \$1.00**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

**FILED**

File Date: \_\_\_\_\_  
Check No.: \_\_\_\_\_  
By: **12/38/8**  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **Joseph T. Scharff** Date **2-28-03**

Print or Type Name of Officer  
**Secretary and Treasurer**



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>	
3. Street Address Principal Business Office <b>2235 Route 70 West</b>		City <b>Cherry Hill</b>	State <b>NJ</b>
4. Business Phone No. <b>856-488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>	6. SIC Code <b>8888</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Wholesale and retail financing</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Thomas J. Doll</b>		Vice President Name <b>Mamoru Aida</b>	
Street Address <b>2235 Route 70 West</b>		Street Address <b>2235 Route 70 West</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
Secretary Name <b>Joseph T. Scharff</b>		Treasurer Name <b>Joseph T. Scharff</b>	
Street Address <b>2235 Route 70 West</b>		Street Address <b>2235 Route 70 West</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>Thomas J. Doll</b>		Director Name <b>Mamoru Aida</b>	
Street Address <b>same as above</b>		Street Address <b>same as above</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
Director Name <b>Joseph T. Scharff</b>		Director Name <b>Joseph T. Scharff</b>	
Street Address <b>same as above</b>		Street Address <b>same as above</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares <b>25,000 COMM \$1.00 PAR VALUE</b>	Class/Series <b></b>	Number of Shares <b>2,000</b>	Class/Series <b>common</b>
Par Value <b></b>		Par Value <b>\$1.00</b>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date: 2/1/02  
Check No.: 1105998  
By: CHS

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct, to the best of my knowledge, information and belief.

Signature of Officer: Joseph T. Scharff Date: 1-14-02

Print or Type Name of Officer  
**Joseph T. Scharff**  
Secretary and Treasurer

Title of Officer

5

Form 630 12/01



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>	
3. Street Address Principal Business Office <b>2235 Route 70 West</b>		City <b>Cherry Hill</b>	State <b>NJ</b>
4. Business Phone No. <b>856-488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>	6. ZIP Code <b>08002</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Wholesale and retail financing.</b>			
<b>8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
President Name <b>Thomas J. Doll</b>		Vice President Name <b>Mamoru Aida</b>	
Street Address <b>2235 Route 70 West</b>		Street Address <b>2235 Route 70 West</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
Secretary Name <b>Joseph T. Scharff</b>		Treasurer Name <b>Joseph T. Scharff</b>	
Street Address <b>2235 Route 70 West</b>		Street Address <b>2235 Route 70 West</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
<b>9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
Director Name <b>Thomas J. Doll</b>		Director Name <b>Mamoru Aida</b>	
Street Address <b>Same as above</b>		Street Address <b>Same as above</b>	
City <b></b>	State <b></b>	City <b></b>	State <b></b>
Zip <b></b>		Zip <b></b>	
Director Name <b>Joseph T. Scharff</b>		Director Name <b></b>	
Street Address <b>Same as above</b>		Street Address <b></b>	
City <b></b>	State <b></b>	City <b></b>	State <b></b>
Zip <b></b>		Zip <b></b>	
<b>10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/></b>		<b>11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/></b>	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares <b>25,000</b>	Class/Series <b>Common</b>	Number of Shares <b>2,000</b>	Class/Series <b>Common</b>
Par Value <b>\$1.00</b>		Par Value <b>\$1.00</b>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date: **1/22**  
**996438**

Check No.: **2**

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct to the best of my knowledge, information and belief.

Signature of Officer: **Joseph T. Scharff** Date: **1/15/01**

Print or Type Name of Officer  
**Joseph T. Scharff**

**Secretary & Treasurer**

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>	
3. Street Address Principal Business Office <b>2235 Route 70 West</b>		City <b>Cherry Hill</b>	State <b>NJ</b>
		Zip <b>08002</b>	
4. Business Phone No. <b>856-488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Wholesale and retail financing.</b>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Thomas J. Doll</b>		Vice President Name <b>Mamoru Aida</b>	
Street Address <b>2235 Route 70 West</b>		Street Address <b>2235 Route 70 West</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
Secretary Name <b>Joseph T. Scharff</b>		Treasurer Name <b>Joseph T. Scharff</b>	
Street Address <b>2235 Route 70 West</b>		Street Address <b>2235 Route 70 West</b>	
City <b>Cherry Hill</b>	State <b>NJ</b>	City <b>Cherry Hill</b>	State <b>NJ</b>
Zip <b>08002</b>		Zip <b>08002</b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>Thomas J. Doll</b>		Director Name <b>Mamoru Aida</b>	
Street Address <b>Same as above</b>		Street Address <b>Same as above</b>	
City	State	City	State
Zip		Zip	
Director Name <b>Joseph T. Scharff</b>		Director Name	
Street Address <b>Same as above</b>		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares <b>25,000</b>	Class/Series <b>Common</b>	Number of Shares <b>2,000</b>	Class/Series <b>Common</b>
Par Value <b>\$1.00</b>		Par Value <b>\$1.00</b>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date: **2/4/00**  
Check No.: **904400**  
By: **C**  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: **Joseph T. Scharff** Date: **1-31-00**  
Print or Type Name of Officer: **Joseph T. Scharff**  
Title of Officer: **Secretary & Treasurer**



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>			
3. Street Address Principal Business Office <b>2235 Route 70 West</b>		City <b>Cherry Hill</b>		State <b>NJ</b>	Zip <b>08002</b>
4. Business Phone No. <b>609-488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>			6. SIC Code <b>0000</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Wholesale and retail financing</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Thomas J. Doll</b>			Vice President Name <b>Tomohiko Ikeda</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Secretary Name <b>Joseph T. Scharff</b>			Treasurer Name <b>Joseph T. Scharff</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Thomas J. Doll</b>			Director Name <b>Tomohiko Ikeda</b>		
Street Address <b>same as above</b>			Street Address <b>same as above</b>		
City	State	Zip	City	State	Zip
Director Name <b>Joseph T. Scharff</b>			Director Name		
Street Address <b>same as above</b>			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>25,000</b>	<b>Common</b>	<b>\$1.00</b>	<b>2,000</b>	<b>common</b>	<b>\$1.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date: **Feb 3, 99**

Check No.: **812349**

By: **JD.**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct to the best of my knowledge, information and belief.

Signature of Officer: **Joseph T. Scharff** Date: **1-22-99**

Print or Type Name of Officer: **Joseph T. Scharff**

Title of Officer: **Secretary & Treasurer**



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>			
3. Street Address Principal Business Office <b>2235 Route 70 West</b>			City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
4. Business Phone No. <b>(609) 488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>			6. SIC Code <b>8888</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Wholesale and retail financing.</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name <b>Thomas J. Doll</b>			Vice President Name <b>Tetsuro Nishizawa</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Secretary Name <b>Joseph T. Scharff</b>			Treasurer Name <b>Joseph T. Scharff</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name <b>Thomas J. Doll</b>			Director Name <b>Tetsuro Nishizawa</b>		
Street Address <b>Same as above</b>			Street Address <b>Same as above</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Director Name <b>Joseph T. Scharff</b>			Director Name <b>Joseph T. Scharff</b>		
Street Address <b>Same as above</b>			Street Address <b>Same as above</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>25,000</b>	<b>Common</b>	<b>\$1.00</b>	<b>2,000</b>	<b>Common</b>	<b>\$1.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date: **2.20.98**  
Check No.: **746923**  
By: **ICP**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

**Joseph T. Scharff**

Print or Type Name of Officer

**Secretary/Treasurer**

Title of Officer





STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. <b>64753</b>		2. Name of Corporation <b>Subaru Acceptance Corporation</b>			
3. Street Address Principal Business Office <b>2235 Route 70 West</b>			City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
4. Business Phone No. <b>(609) 488-8500</b>		5. State of Incorporation <b>NEW JERSEY</b>			6. SIC Code <b>8888</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Wholesale and retail financing</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name <b>Thomas J. Doll</b>			Vice President Name <b>Tetsuro Nishizawa</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Secretary Name <b>Joseph T. Scharff</b>			Treasurer Name <b>Joseph T. Scharff</b>		
Street Address <b>2235 Route 70 West</b>			Street Address <b>2235 Route 70 West</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name <b>Thomas J. Doll</b>			Director Name <b>Tetsuro Nishizawa</b>		
Street Address <b>same as above</b>			Street Address <b>same as above</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
Director Name <b>Joseph T. Scharff</b>			Director Name <b>Te</b>		
Street Address <b>same as above</b>			Street Address <b>same as above</b>		
City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>	City <b>Cherry Hill</b>	State <b>NJ</b>	Zip <b>08002</b>
10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>25,000</b>	<b>Common</b>	<b>\$1.00</b>	<b>2,000</b>	<b>Common</b>	<b>\$1.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 6 4 7 5 3 \*

File Date: **2/6/97**

Check No.: **673951**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct to the best of my knowledge, information and belief.

Signature of Officer: **[Signature]** Date: **1-27-97**

**Joseph T. Scharff**

Print or Type Name of Officer

**Secretary & Treasurer**

Title of Officer

# PROFIT CORPORATION ANNUAL REPORT

## 1996



State of Rhode Island and Providence Plantations  
James R. Langevin, *Secretary of State*  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1  
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. <b>64753</b>		2. NAME OF CORPORATION <b>Subaru Acceptance Corporation</b>			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE <b>2235 Route 70 West</b>			CITY <b>Cherry Hill</b>	STATE <b>NJ</b>	ZIP CODE <b>08002</b>
4. BUSINESS PHONE NO. <b>(609) 488-8500</b>		5. STATE OF INCORPORATION <b>NEW JERSEY</b>			6. SIC CODE <b>8988</b>
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND <b>Wholesale and retail financing</b>					
<b>8. NAMES AND ADDRESSES OF THE OFFICERS</b>					
PRESIDENT NAME <b>Thomas J. Doll</b>			VICE PRESIDENT NAME <b>Tetsuro Nishizawa</b>		
STREET ADDRESS <b>2235 Route 70 West</b>			STREET ADDRESS <b>2235 Route 70 West</b>		
CITY <b>Cherry Hill</b>	STATE <b>NJ</b>	ZIP CODE <b>08002</b>	CITY <b>Cherry Hill</b>	STATE <b>NJ</b>	ZIP CODE <b>08002</b>
SECRETARY NAME <b>Joseph T. Scharff</b>			TREASURER NAME <b>Joseph T. Scharff</b>		
STREET ADDRESS <b>2235 Route 70 West</b>			STREET ADDRESS <b>2235 Route 70 West</b>		
CITY <b>Cherry Hill</b>	STATE <b>NJ</b>	ZIP CODE <b>08002</b>	CITY <b>Cherry Hill</b>	STATE <b>NJ</b>	ZIP CODE <b>08002</b>
<b>9. NAMES AND ADDRESSES OF THE DIRECTORS</b>					
DIRECTOR NAME <b>Thomas J. Doll</b>			DIRECTOR NAME <b>Tetsuro Nishizawa</b>		
STREET ADDRESS <b>same as above</b>			STREET ADDRESS <b>same as above</b>		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME <b>Joseph T. Scharff</b>			DIRECTOR NAME		
STREET ADDRESS <b>same as above</b>			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
<b>10. SHARES AUTHORIZED AND ISSUED</b>					
<b>AUTHORIZED SHARES</b>			<b>ISSUED SHARES</b>		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
<b>25,000</b>	<b>Common</b>	<b>\$1.00</b>	<b>2,000</b>	<b>Common</b>	<b>\$1.00</b>

This report must be **SIGNED IN INK** by either the  
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct to the best of my knowledge, information and belief.

Signature of Officer

**Joseph T. Scharff**

Print or Type Name of Officer

**Secretary & Treasurer**

Title of Officer

**3-26-96**  
Date

File Date:

Check No:

By:

For Secretary of State Use Only

**ANNUAL REPORT**

Please Type or Print  
File Annually - Jan. 1 - March 1  
Filing Fee \$50.00  
Make Checks Payable to: Secretary of State

**ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.**

Corporate ID: 0064753 Annual Report for the year: 1995

Name of Corporation: Subaru Acceptance Corporation

Business entity organized under the laws of the State of: New Jersey

For foreign entity, address and telephone number of principal office:

2235 Route 70 West  
Cherry Hill, NJ 08002

Phone: (609) 488-8500

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
None

Phone: ( )

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

Wholesale and retail financing

**THE NAMES OF THE OFFICERS ARE:**

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Thomas J. Doll	2235 Route 70 West	Cherry Hill, NJ	08002
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Tetsuro Nishizawa	Same		
SECRETARY & Treasurer	STREET ADDRESS	CITY/STATE	ZIP CODE
Joseph T. Scharff	Same		
<del>CHAIRMAN</del> Chairman	STREET ADDRESS	CITY/STATE	ZIP CODE
Kazuhiro Miyake	Same		

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Kazuhiro Miyake	See above		
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Thomas J. Doll	See above		
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Joseph T. Scharff	See above		

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares 25,000 Class / Series Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares 2,000 Class / Series Common

Date 2-22, 19 95

By: 

PRINT OR TYPE NAME OF OFFICER SIGNING

Joseph T. Scharff

TITLE OF OFFICER SIGNING

Secy/Treasurer

Form 31 1/95

**DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:**

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

CT CORPORATION SYSTEM  
123 DYER STREET  
PROVIDENCE RI 02903

**FILED**

**MAR 15 1995**

By CC 469630

iling Fee \$50.00  
ayable to:  
ecretary of State

PLEASE TYPE or PRINT  
State of Rhode Island and Providence Plantations  
Office of The Secretary of State  
100 North Main Street  
Providence, Rhode Island 02903-1335  
401-277-3040

File Annually  
LLC: Sept. 1 - Nov. 1  
CORP: Jan. 1 - March 1

0064753

1994

Corporate ID: \_\_\_\_\_ Annual Report for the year: \_\_\_\_\_

Subaru Acceptance Corporation

Name of Business Entity: \_\_\_\_\_

Business entity organized under the laws of the State of: New Jersey

Federal Taxpayer Identification Number: \_\_\_\_\_

For foreign entity, address and telephone number of principal office:

2235 Route 70 West

Cherry Hill, NJ 08002

Phone: ( 609 ) 488-8500

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

None

Phone: ( ) \_\_\_\_\_

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)  
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)  
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Susan Patton, Sr. Paralegal

Brief statement of the character of business conducted in Rhode Island:

Wholesale and retail financing

Date of Organization: 6-4-91

Date of Qualification to do business in Rhode Island (if foreign entity):  
7-1-91

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One)			
Scott R. Beagle	2235 Route 70 West	Cherry Hill, NJ	08002
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One)			
Chairman Kazuhiro Miyake	same		
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One)			
Joseph T. Scharff	same		
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One)			
Joseph T. Scharff	same		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Kazuhiro Miyake	see above		
Scott R. Beagle	see above		
Thomas J. Doll	same		
Joseph T. Scharff	see above		

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 25,000  
CLASS Common  
SERIES --  
PAR VALUE OR WITHOUT PAR \$1.00

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 2,000  
CLASS Common  
SERIES  
PAR VALUE OR WITHOUT PAR \$1.00

FILED

FEB 28 1994

By 016397 MMC

*[Signature]*

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

14106

Corporate ID 0064753 Annual Report for the year 1993

FIRST: The name of the corporation is Subaru Acceptance Corporation

SECOND: It is incorporated under the laws of New Jersey

THIRD: Character of business, briefly stated, is Wholesale and retail financing

FOURTH: If foreign corporation, address of its principal office 2235 Route 70 West  
Cherry Hill, New Jersey 08002

FIFTH: Business address in Rhode Island None

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Scott R. Beagle	Director	2235 Route 70 West, Cherry Hill, NJ 08002
Takeshi Higurashi	Director	Same
Joseph T. Scharff	Director	Same
Takeshi Higurashi	<del>Chairman</del> President	Same
Scott R. Beagle	<del>Vice</del> President	Same
Joseph T. Scharff	Secretary	Same
Joseph T. Scharff	Treasurer	Same

SEVENTH: Number of Shares authorized:

No. of Shares	Class
25,000	Common

FEB 22 1993  
SECY OF STATE

Par Value  
or statement that  
shares are without  
par value  
\$1.00

EIGHTH: Number of Shares issued:

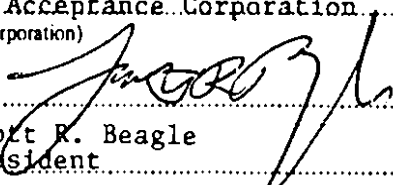
No. of Shares	Class
2,000	Common

Series  
--

Par Value  
or statement that  
shares are without  
par value  
\$1.00

Dated February 11 19 93.

Subaru Acceptance Corporation  
(Name of Corporation)

By   
Scott R. Beagle  
Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

SM # 32373

Corporate ID 0054753 Annual Report for the year 1992

FIRST: The name of the corporation is Subaru Acceptance Corporation

SECOND: It is incorporated under the laws of New Jersey

THIRD: Character of business, briefly stated, is Retail and wholesale financing

FOURTH: If foreign corporation, address of its principal office

2235 Route 70 West, Cherry Hill, NJ 08002

FIFTH: Business address in Rhode Island None

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
George T. Muller	Director	2235 Route 70 West, Cherry Hill, NJ 08002
Scott R. Beagle	Director	same
Thomas R. Gibson	Director	same
George T. Muller	President	same
Scott R. Beagle	Vice President	same
Philip L. Lustbader	Secretary	same
Scott R. Beagle	Treasurer	same

SEVENTH: Number of Shares authorized:

No. of Shares	Class
25,000	Common

PAID

MAR 02 1992

Par Value  
or statement that  
shares are without  
par value  
\$1.00

EIGHTH: Number of Shares issued:

No. of Shares	Class
2,000	Common

SECY OF STATE

Par Value  
or statement that  
shares are without  
par value  
\$1.00

Dated 2-25 19 92

SUBARU ACCEPTANCE CORPORATION

(Name of Corporation)

By X

Title Vice President

(Report must be signed by an officer)