

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805954

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** TOYOTA MOTOR INSURANCE COMPANY

**Current Principal Place of Business:**

TOYOTA MOTOR INSURANCE COMPANY  
19001 S. WESTERN AVENUE  
TORRANCE, CA 905011106

**New Principal Place of Business:**

TOYOTA MOTOR INSURANCE COMPANY  
19001 S. WESTERN AVENUE  
TORRANCE, CA 90501

**Current Mailing Address:**

C/O TFS LEGAL DEPT.  
19001 S. WESTERN AVE. EF12  
TORRANCE, CA 90501 US

**New Mailing Address:**

**FEI Number:** 33-0398726      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P D  
Name: BORST, GEORGE  
Address: 19001 S. WESTERN AVE.  
City-St-Zip: TORRANCE, CA 90501

Title: S D  
Name: PELLICIONI, DAVID  
Address: 19001 S. WESTERN AVE.  
City-St-Zip: TORRANCE, CA 90501

Title: T D  
Name: YAJIMA, ICHIRO  
Address: 19001 S. WESTERN AVE.  
City-St-Zip: TORRANCE, CA 90501

Title: D  
Name: BALLINGER, CHRISTOPHER  
Address: 19001 S. WESTERN AVENUE  
City-St-Zip: TORRANCE, CA 90501

Title: CEO  
Name: BORST, GEORGE  
Address: 19001 S. WESTERN AVENUE  
City-St-Zip: TORRANCE, CA 90501

Title: AS D  
Name: BRUNI, VICTOR  
Address: 19001 S. WESTERN AVE  
City-St-Zip: TORRANCE, CA 90501

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: DAVID PELLICIONI

SEC.

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date