FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07 1998 8:00am
Secretary of State

DOCUMENT # **665154** **(1)**

1. Corporation Name
EAST COAST CAR RENTALS, INC.

Principal Place of Business	Mailing Address
701 FIST STREET SUITE 310 JACKSONVILLE FL 32204	701 FIST STREET SUITE 310 JACKSONVILLE FL 32204

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/25/1980**

4. FEI Number: **59-1981133** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

LAWRENCE M. MATHENY JR & PAMELA L. WIKER
701 FISK STREET
2ND FLOOR
JACKSONVILLE FL 32204

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~CD~~	☑ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	~~HERZOG, GERALD W.~~		1.2 NAME		
STREET ADDRESS	~~701 FISK STREET~~		1.3 STREET ADDRESS		
CITY-ST-ZIP	~~JACKSONVILLE, FL 0~~		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	IVEY, BRUCE D		2.2 NAME		
STREET ADDRESS	701 FISK STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 0		2.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	3.1 TITLE	S/T/D/C	☑ Change ☐ Addition
NAME	MATHENY, LAWRENCE M.		3.2 NAME	Matheny, Lawrence M. Jr.	
STREET ADDRESS	701 FISK STREET		3.3 STREET ADDRESS	701 Fisk St., Suite 200	
CITY-ST-ZIP	JACKSONVILLE, FL 0		3.4 CITY-ST-ZIP	Jacksonville, FL 32204	
TITLE	P	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	KOPP, E A JR		4.2 NAME		
STREET ADDRESS	701 FISK STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32204		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Henry H. Graham Jr. 4-2-98 (904)354-3300

CR2E034 (10/97)