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Mar 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 696652

(7)

1. Corporation Name

AFFORDABLE AUTO RENTAL, INC.



Principal Place of Business

1720 S.W. 15TH AVE.
OCALA FL 34474

Mailing Address

1720 S.W. 15TH AVE.
OCALA FL 34474-3550

3. Date Incorporated or Qualified

07/29/1981

3a. Date of Last Report

03/11/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-2113731

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

WILLIAMS, C R
1720 S.W. 15TH AVE.
OCALA FL 32674

10. Name and Address of New Registered Agent

81 Name

Patricia A. Williams

82 Street Address (P.O. Box Number is Not Acceptable)

1720 SW 15th Ave.

83

84 City

Ocala

FL

85 Zip Code

34474

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 authorized with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Patricia A. Williams*

Patricia A. Williams

2/21/97

(Signature, type or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME WILLIAMS, C R
STREET ADDRESS 1720 S.W. 15TH AVE.
CITY-ST-ZIP Ocala, FL 00000 ☒ DELETE

TITLE ST
NAME WILLIAMS, PA
STREET ADDRESS 1720 SW 15 AVE
CITY-ST-ZIP Ocala FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE P T
2.2 NAME Williams, Patricia A. ☒ Change ☐ Addition
2.3 STREET ADDRESS 1720 SW 15th Ave.
2.4 CITY-ST-ZIP Ocala, FL 34474

3.1 TITLE S
3.2 NAME Williams, Stephen L. ☐ Change ☒ Addition
3.3 STREET ADDRESS 1720 SW 15th Ave.
3.4 CITY-ST-ZIP Ocala, FL 34474

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: *Patricia A. Williams*

Patricia A. Williams 2/21/97 352-622-6222

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034 (9/96)