## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 19, 2005 08:00 AM Secretary of State

201-307-2366

Daytime Phone #

ANNUAL REPORT				Secretary of State
DOCUMENT # M0200000136  1. Entity Name HERTZ VEHICLE FINANCING LLC			Secretary of State	
225 BRAE B	e of Business LVD. , NJ 07656	Mailing Address 225 BRAE BLVD. PARK RIDGE, NJ 07656		
DO NOT WRITE IN THIS SPA			CE	02282005 No Chg-LLC
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstalling)  DATE  Filling Fee is \$50.00  Due by May 1, 2005				
9	ue by May 1, 2005  MANAGING MEMBER	S_MANAGERS	<u> </u>	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THE HERTZ CORPORATION 225 BRAE BLVD. PARK RIDGE, NJ 07656	780.		000000316668 04/19/05-80084-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY ST-ZIP		<u></u>		

11. 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 report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the receiver or truetee employeed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

John Szot