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95 MAY -1 PM 8:53

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT**

1995 5-1-95

FLORIDA DEPARTMENT OF STATE

Sandra B. Northam

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 732949

(3)

1. Corporation Name

**CAR AND TRUCK RENTING AND LEASING ASSOCIATION OF
FLORIDA, INCORPORATED**

Principal Place of Business

Mailing Address

**C/O MUGGETT GROUP
244 NORTH FREDERICK AVE.
DAYTONA BCH FL 32114
US**

**C/O MUGGETT GROUP
244 NORTH FREDERICK AVE.
DAYTONA BCH FL 32114
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/04/1975	3a. Date of Last Report 04/19/1994
4. FEI Number 59-1173303	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 3905 E1 Rey Road Suite, Apt. #, etc. 22 City & State 23 Orlando, Fl Zip 24 32808-7917	2a. Mailing Address 26 3905 E1 Rey Road Suite, Apt. #, etc. 27 City & State 28 Orlando, Fl Zip 29 32808-7917
Country 25 USA	Country 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARTMAN, JAMES C
3905 EL REY ROAD
ORLANDO FL 32808**

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

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	DOWLING, MONTIE	1.2 NAME	
STREET ADDRESS	4303 ATLANTIC BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	SPRINGER, SCOTT	2.2 NAME	
STREET ADDRESS	525 N. OCEAN DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	MARJER, JR., JAMES	3.2 NAME	
STREET ADDRESS	2810 ST. AUGUSTINE RD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL	3.4 CITY - ST - ZIP	
TITLE	STD	4.1 TITLE	☐ Change ☐ Addition
NAME	HARTMAN, JAMES	4.2 NAME	
STREET ADDRESS	3905 EL REY ROAD	4.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	BACK, CHARLES R.	5.2 NAME	
STREET ADDRESS	3600 NW 82ND AVE.	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	5.4 CITY - ST - ZIP	
TITLE		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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information presented 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES C. HARTMAN

04/25/95

407-298-2982

Date

Daytime Phone #