2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855687

FILED Apr 10, 2009 Secretary of State

Entity Name: HERTZ VEHICLE SALES CORPORATION

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
225 BRAE BLVD PARK RIDGE, NJ 076560713					
Current Mailing Address:			New Mailir	New Mailing Address:	
225 BRAE BLVD PARK RIDGE, NJ 076560713					
FEI Number: 13-3050952 FEI Number Applied For () FEI Number			I Number Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US					
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:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S () ZIMMERMAN, JI 225 BRAE BOUL PARK RIDGE, N	LEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () NOTHWANG, JC 225 BRAE BOUL PARK RIDGE, N	LEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVPT () DOUGLAS, ELY 225 BRAE BOUL PARK RIDGE, N	LEVARD	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition DOUGLAS, ELYSE 225 BRAE BOULEVARD PARK RIDGE, NJ 07656	
Title: Name: Address: City-St-Zip:	AS () FLORE, ANTHO 225 BRAE BOUL PARK RIDGE, N	LEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS () SZOT, JOHN 225 BRAE BOUL PARK RIDGE, N		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	AS () Change (X) Addition DUAH, ANTOINETTE 225 BRAE BLVD PARK RIDGE, NJ 07656	
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.					

SIGNATURE: ANTOINETTE DUAH AS 04/10/2009