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FILED

May 14 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 # F95000005896 (4)

1. Corporation Name

KIRK NATIONALEASE DAILY RENTAL INC.



Principal Place of Business

800 S VANDEMARK RD
PO BOX 4369
SIDNEY OH 45365

Mailing Address

800 S VANDEMARK RD
PO BOX 4369
SIDNEY OH 45365-4369

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

12/04/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

31-1436078

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

SACK, MARTIN JR, ESQ
2064 PARK ST
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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP
NAME HARVEY, JAMES R
STREET ADDRESS HOEWISHER RD
CITY-ST-ZIP SIDNEY OH 45365 ☐ DELETE

TITLE DCS
NAME SCHROER, LLOYD W
STREET ADDRESS 5641 ST RTE 274
CITY-ST-ZIP NEW BREMEN OH 45869 ☐ DELETE

TITLE V
NAME TRABUE, MICHAEL D
STREET ADDRESS 1350 CHILDREN'S HOME
CITY-ST-ZIP SIDNEY OH 45365 ☐ 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 DCT
1.2 NAME Schroer, Lloyd W
1.3 STREET ADDRESS 5641 ST RTE 274
1.4 CITY-ST-ZIP New Bremen OH 45869 ☒ Change ☐ Addition

2.1 TITLE DCP
2.2 NAME Harvey, James R
2.3 STREET ADDRESS 3412 Pointe Creek Ct., #102
2.4 CITY-ST-ZIP Bonita Springs, FL 34134 ☒ Change ☐ Addition

3.1 TITLE V
3.2 NAME Richard G. Joseph
3.3 STREET ADDRESS 194 Finsbury Lane
3.4 CITY-ST-ZIP Troy, OH 45373 ☐ Change ☒ Addition

4.1 TITLE S
4.2 NAME Thomas A. Menker
4.3 STREET ADDRESS 119 N. Wayne St
4.4 CITY-ST-ZIP St. Marys, OH 45885 ☐ Change ☒ Addition

5.1 TITLE S
5.2 NAME Debra Hovestreydt
5.3 STREET ADDRESS 16100 Ft. Loromic-Swunders Rd.
5.4 CITY-ST-ZIP Sidney, OH 45365 ☐ Change ☒ Addition

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

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

[Signature]

4/26/97 9:27 498 1151

CR2E034 (9/96)