

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Apr 27 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F96000001096 (4)**

1. Corporation Name

**NATIONAL CAR RENTAL LICENSING, INC.**



Principal Place of Business

**208 ST JAMES AVE  
GOOSE CREEK SC 29445**

Mailing Address

**7700 FRANCE AVE SO.  
MINNEAPOLIS MN 55435  
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip Country

**24** **25**

2a. Mailing Address

**26** **110 S.E. 6TH ST.**

**27** Suite, Apt. #, etc.

**28** **FT. LAUDERDALE, FL**

**29** **33301** **30** Country

3. Date Incorporated or Qualified

**03/04/1996**

4. FEI Number

**41-1811376**

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**TITLE** **PCED** **DELETE**  
**NAME** **LOBECK, WILLIAM E JR**  
**STREET ADDRESS** **208 ST JAMES AVE**  
**CITY-ST-ZIP** **GOOSE CREEK SC 29445**

**TITLE** **V** **DELETE**  
**NAME** **HARDY, IRAD B III**  
**STREET ADDRESS** **208 ST JAMES AVE**  
**CITY-ST-ZIP** **GOOSE CREEK SC 29445**

**TITLE** **VCFO** **DELETE**  
**NAME** **ZINTER, ERVIN A**  
**STREET ADDRESS** **208 ST JAMES AVE**  
**CITY-ST-ZIP** **GOOSE CREEK SC 29445**

**TITLE** **V** **DELETE**  
**NAME** **PARRELL, JEFFRY J**  
**STREET ADDRESS** **208 ST JAMES AVE**  
**CITY-ST-ZIP** **GOOSE CREEK SC 29445**

**TITLE** **VS** **DELETE**  
**NAME** **FREDENBURG, WESLEY C**  
**STREET ADDRESS** **208 ST JAMES AVE**  
**CITY-ST-ZIP** **GOOSE CREEK SC 29445**

**TITLE** **V** **DELETE**  
**NAME** **PARTRIDGE, BRADLEY A**  
**STREET ADDRESS** **208 ST JAMES AVE**  
**CITY-ST-ZIP** **GOOSE CREEK SC 29445**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1 TITLE** **P** ☐ Change ☒ Addition  
**1.2 NAME** **William E. LOBECK Jr.**  
**1.3 STREET ADDRESS** **110 S.E. 6TH ST.**  
**1.4 CITY-ST-ZIP** **FT. LAUDERDALE, FL 33301**

**2.1 TITLE** **VSD** ☐ Change ☒ Addition  
**2.2 NAME** **JAMES O. COLE**  
**2.3 STREET ADDRESS** **110 S.E. 6TH ST.**  
**2.4 CITY-ST-ZIP** **FT. LAUDERDALE, FL 33301**

**3.1 TITLE** **D** ☐ Change ☒ Addition  
**3.2 NAME** **THOMAS W. HAWKINS**  
**3.3 STREET ADDRESS** **110 S.E. 6TH ST.**  
**3.4 CITY-ST-ZIP** **FT. LAUDERDALE, FL 33301**

**4.1 TITLE** **T** ☐ Change ☒ Addition  
**4.2 NAME** **KATHLEEN HYLE**  
**4.3 STREET ADDRESS** **110 S.E. 6TH ST.**  
**4.4 CITY-ST-ZIP** **FT. LAUDERDALE, FL 33301**

**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 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

954-769-7700

CR2E034 (10/97)