

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 20, 2001 08:00 AM**
Secretary of State**DOCUMENT # F96000001096**1. Entity Name
NATIONAL CAR RENTAL LICENSING, INC.Principal Place of Business
208 ST JAMES AVE

GOOSE CREEK SC 29445 US
Mailing Address
200 S. ANDREWS AVE

FORT LAUDERDALE FL 33301 US2. Principal Place of Business
Suite, Apt. #, etc.3. Mailing Address
208 ST JAMES AVE
Suite, Apt. #, etc.City & State
GOOSE CREEK SCZip Country
29445 US4. FEI Number
41-1811376
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentC T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD

PLANTATION FL 33324 US

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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.

SIGNATURE _____ **02/20/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees**11. OFFICERS AND DIRECTORS**TITLE VPLC ☐ Delete
NAME MILLER MARY J
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE AS ☐ Delete
NAME GRADY JAMES
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE T ☐ Delete
NAME WILSON LELAND F
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE VPI ☐ Delete
NAME CUSTAGE DENNIS
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE VGSC ☐ Delete
NAME LIEBERMAN SCOTT D
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE P ☐ Delete
NAME JOHNSON ERNEST L
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE VPT ☒ Change ☐ Addition
NAME WILSON LELAND F
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE VPM ☒ Change ☐ Addition
NAME MACDONALD JOHN
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE DVS ☒ Change ☐ Addition
NAME LIEBERMAN SCOTT D
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445TITLE DVP ☒ Change ☐ Addition
NAME SOLETA LARRY
STREET ADDRESS 208 ST. JAMES AVE
CITY-ST-ZIP GOOSE CREEK SC 29445

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Scott D. Lieberman

VP

02/20/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

JAMES R. WOOD, VICE PRESIDENT
208 ST. JAMES AVE.

GOOSE CREEK, SC 29445