

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002597

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: NATIONAL CAR RENTAL FINANCING CORPORATION

## Current Principal Place of Business:

6929 N. LAKEWOOD AVE.  
SUITE 100 MOD 1.2 202  
TULSA, OK 741171808 US

## New Principal Place of Business:

## Current Mailing Address:

6929 N. LAKEWOOD AVE.  
SUITE 100 MOD 1.2 202  
TULSA, OK 741171808 US

## New Mailing Address:

FEI Number: 41-1834759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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:

Title: DPT ( ) Delete  
Name: FIGVOROA, ORLANDO  
Address: 48 WALL ST., 27TH FLR.  
City-St-Zip: NEW YORK, NY 10005 US

Title: DVPA ( ) Delete  
Name: BRADY, MARY L  
Address: 48 WALL STREET, 27TH FLOOR  
City-St-Zip: NEW YORK, NY 10005

Title: VPAS ( ) Delete  
Name: GORDON, JILL A  
Address: 48 WALL STREET, 27TH FLOOR  
City-St-Zip: NEW YORK, NY 10005

Title: DAT ( ) Delete  
Name: ABEDINE, BENJAMIN  
Address: 48 WALL ST.  
City-St-Zip: NEW YORK, NY 10005

Title: DAS ( ) Delete  
Name: GEBRON, LORI  
Address: 48 WALL ST.  
City-St-Zip: NEW YORK, NY 10005

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPAS (X) Change ( ) Addition  
Name: KEITH, AMY S  
Address: 48 WALL STREET, 27TH FLOOR  
City-St-Zip: NEW YORK, NY 10005

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: /ORLANDO FIGUEROA

DPT

01/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date