


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90211 033 ***150.00

| | | | | | |
|--|--|---|---|---|--|
| DOCUMENT # F99000003698 1. Entity Name HERTZ LOCAL EDITION TRANSPORTING, INC. | | | |  | |
| Principal Place of Business 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | | | Mailing Address 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 22-3376683 | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 | | | | 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD NOTHWANG, JOSEPH R 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV SIRACUSA, PAUL J 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV POLLACK, IRWIN M 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S ROLFE, HAROLD E 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T RILLINGS, ROBERT H 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C FOTI, RICHARD J 225 BRAE BOULEVARD PARK RIDGE, NJ 07656 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director, VP Franzese, Louis R. 225 Brae Blvd. Park Ridge, NJ 07656 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Treasurer Douglas, Elyse 225 Brae Blvd. Park Ridge, NJ 07656 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | _____ _____ _____ _____ | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: _____ | | John Szot | | 4-18-07 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date | | Daytime Phone # | |

HERTZ LOCAL EDITION TRANSPORTING, INC.
DIRECTORS AND OFFICERS

DIRECTORS

OFFICE ADDRESS

ATTACHMENT

40083592

#F99000003698

Joseph R. Nothwang

225 Brae Boulevard
Park Ridge, NJ 07656

Louis R. Franzese

225 Brae Boulevard
Park Ridge, NJ 07656

Paul J. Siracusa

225 Brae Boulevard
Park Ridge, NJ 07656

OFFICERS

OFFICE ADDRESS

Joseph R. Nothwang
President

225 Brae Boulevard
Park Ridge, NJ 07656

Louis R. Franzese
Vice President

225 Brae Boulevard
Park Ridge, NJ 07656

Paul J. Siracusa
Vice President

225 Brae Boulevard
Park Ridge, NJ 07656

Harold E. Rolfe
Secretary

225 Brae Boulevard
Park Ridge, NJ 07656

Elyse Douglas
Treasurer

225 Brae Boulevard
Park Ridge, NJ 07656

Richard J. Foti
Controller

225 Brae Boulevard
Park Ridge, NJ 07656

Anthony C. Fiore
Assistant Secretary

225 Brae Boulevard
Park Ridge, NJ 07656

I. David Parkoff
Assistant Secretary

225 Brae Boulevard
Park Ridge, NJ 07656

John M. Szot
Assistant Secretary

225 Brae Boulevard
Park Ridge, NJ 07656

Lauren S. Babus
Assistant Treasurer

225 Brae Boulevard
Park Ridge, NJ 07656

March 6, 2007