

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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

97 JUN 24 PM 3:37

SECRETARY OF STATE



DOCUMENT # J49822 (6)

1. Corporation Name
PERFORMANCE RENT-A-CAR, INC.

Principal Place of Business
**222 SAN MARCO AVE
 ST AUGUSTINE FL 32084**

Mailing Address
**222 SAN MARCO AVE
 ST AUGUSTINE FL 32084-2723**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

**DE ANTONIS, G.W., JR.
 222 SAN MARCO AVE
 ST AUGUSTINE FL 32084**

3. Date Incorporated or Qualified
12/31/1986

3a. Date of Last Report
04/18/1996

4. FID Number
59-2765253

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

10. Name and Address of New Registered Agent

81 Name **JAMES R. OWENS**
 82 Street Address (P.O. Box Number is Not Acceptable)
222 SAN MARCO AVE
 83
 84 City **ST. AUGUSTINE FL** 85 Zip Code **32084**

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: *James R. Owens* 4-20-97

12. OFFICERS AND DIRECTORS

TITLE	PO	<input checked="" type="checkbox"/> DELETE
NAME	DE ANTONIS, JOYCE	
STREET ADDRESS	10 BARU RD	
CITY-ST-ZIP	ST AUGUSTINE FL	
TITLE	VO	<input checked="" type="checkbox"/> DELETE
NAME	DE ANTONIS, G.W. J	
STREET ADDRESS	222 SAN MARCO AVE.	
CITY-ST-ZIP	ST AUGUSTINE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	JAMES R. OWENS	
13 STREET ADDRESS	222 SAN MARCO AVE	
14 CITY-ST-ZIP	ST. AUGUSTINE FL 32084	
21 TITLE	VO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	PATRICK UNDERMEYER	
23 STREET ADDRESS	222 SAN MARCO AVE	
24 CITY-ST-ZIP	ST. AUGUSTINE, FL 32084	
31 TITLE	Denise Tuttle Sec	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS	222 SAN MARCO AVE	
34 CITY-ST-ZIP	ST. AUGUSTINE, FL, 32084	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *James R. Owens* 4-20-97 9018241778

CR2E034 (9/95)