


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 05, 2008 08:00 A
Secretary of State

DOCUMENT # N38591 1. Entity Name THE FLORIDA RENTAL DEALERS ASSOCIATION, INC.	
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Principal Place of Business 6608 ADAMO DR TAMPA, FL 33619	Mailing Address 6608 ADAMO DR TAMPA, FL 33619
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DO NOT WRITE IN THIS SPACE



03012008 No Chg-NP CR2E037 (4/08)

4. FEI Number 59-2977112	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**BEVILLE, TERRY
6608 ADAMO DT
TAMPA, FL 33619**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BEVILLE, TERRY 6608 ADAMO DR TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARNETT, JAN 1948 US 1 S SAINT AUGUSTINE, FL 32086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUTLEDGE, MIKE 3443 SILVER SPRINGS BLD OCALA, FL 34470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUTTON, LARRY 14620 N. NEBRASKA AVE., STE. B-102 TAMPA, FL 33613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAY, KIRK 735 MASON AVE. DAYTONA BEACH, FL 32117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KALE, CHRIS 4440 RAMA DR. TAMPA, FL 33619

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03/20/08-80022-012 61.25

**DO NOT WRITE
IN THIS SPACE**

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 617, 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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/3/08

813-623-5461

TERRY BEVILLE