
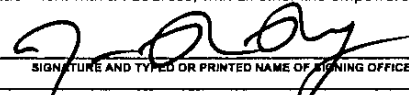


**2007-FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P14800 1. Entity Name THRIFTY RENT-A-CAR SYSTEM, INC.			
Principal Place of Business 5330 E 31ST ST. TULSA, OK 74135 US		Mailing Address 5330 E 31ST ST. TULSA, OK 74135 US	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		04112007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 73-0574010 Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		DO NOT WRITE IN THIS SPACE	
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			
TITLE	PD	<div>U00000722788 05/02/07-80046-006 150.00</div> DO NOT WRITE IN THIS SPACE	
NAME	ANDERSON, R. SCOTT		
STREET ADDRESS	5310 E 31ST ST.		
CITY-ST-ZIP	TULSA, OK 74135		
TITLE	EVPS		
NAME	VANIMAN, VICKI J		
STREET ADDRESS	5330 EAST 31ST STREET		
CITY-ST-ZIP	TULSA, OK 74135		
TITLE	VP		
NAME	SPARKMAN, DAVID W		
STREET ADDRESS	5330 E 31ST ST.		
CITY-ST-ZIP	TULSA, OK 74135		
TITLE	VP		
NAME	CEREFICE, JEFFREY A		
STREET ADDRESS	5310 E 31ST ST.		
CITY-ST-ZIP	TULSA, OK 74135		
TITLE	AS		
NAME	RYAN, JAMES R.		
STREET ADDRESS	5330 E. 31ST STREET		
CITY-ST-ZIP	TULSA, OK		
TITLE	T		
NAME	PECK, PAMELA S		
STREET ADDRESS	5330 E 31ST ST.		
CITY-ST-ZIP	TULSA, OK 74135		
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: 		James R. Ryan 4-17-07 918-669-2076	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	