

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P33841

(8)

1. Corporation Name

PLM RENTAL, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:37

Principal Place of Business

C/O LEGAL DEPARTMENT
ONE MARKET, STEUART ST. TWR. #900
SAN FRANCISCO CA 94105-1301

Mailing Address

C/O LEGAL DEPARTMENT
ONE MARKET, STEUART ST. TWR. #900
SAN FRANCISCO CA 94105-1301

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

04/30/1991

3a. Date of Last Report

02/16/1994

4. FEI Number

94-3132853

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

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

(Signature, typed or printed name of registered agent and title of individual)

(NOTE: Registered Agent signature required when instituting)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

PD

MONACO, BRUCE F

ONE MARKET, #900 STEUART ST.
SAN FRANCISCO CA 94105-1301

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

VSD

PEARY, STEPHEN

ONE MARKET, #900 STEUART ST.
SAN FRANCISCO CA 94105-1301

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

CFO

ALLGOOD, J. MICHAEL

ONE MARKET, #900 STEUART ST.
SAN FRANCISCO CA 94105-1301

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

P

Robert N. Tidball

One Market, Steuart Street Twr. #900
San Francisco, CA 94105-1301

DV

Douglas P. Goodrich

One Market, Steuart Street Twr. #900
San Francisco, CA 94105-1301

☒ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in 22a, Part 1.0007(C)(9), Florida Statutes. I further certify that I am an officer or director of the corporation at the time of filing and am duly qualified to execute this report as required by Chapter 1307, Florida Statutes, and that my name appears in Block 12 or 13, if it changed, or on the other filing with an address.

SIGNATURE: *Lorraine Schwerin* Lorraine Schwerin, Assistant Secretary 2/1/95 415/9057360

(Signature, typed or printed name of individual officer or director)