2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102963

Entity Name: BRIGHT RENTALS, INC.

FILED Mar 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ATTN: RYAN WORKMAN 1296 SOUTH PLEASANT HILL GATE WAUKEGAN, IL 60085 **Current Mailing Address: New Mailing Address:** ATTN: RYAN WORKMAN 1296 SOUTH PLEASANT HILL GATE WAUKEGAN, IL 60085 FEI Number: 20-3186345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WORKMAN, MATTHEW 14303 NEPTUNE RD. SEMINOLE, FL 33706 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: PRFS (X) Change () Addition WORKMAN, RYAN Name: Name: WORKMAN, RYAN F DR. 1296 SOUTH PLEASANT HILL GATE 1296 SOUTH PLEASANT HILL GATE Address: Address: City-St-Zip: WAUKEGAN, IL 60085 City-St-Zip: WAUKEGAN, IL 60085 Title: Title: TREA () Delete (X) Change () Addition Name: WORKMAN, RYAN Name: WORKMAN, RYAN F DR. 1296 SOUTH PLEASANT HILL GATE 1296 SOUTH PLEASANT HILL GATE Address: Address: WAUKEGAN, IL 60085 City-St-Zip: City-St-Zip: WAUKEGAN, IL 60085 Title: () Delete Title: () Change () Addition WORKMAN, MATTHEW Name: Name: 14303 NEPTUNE RD. Address: Address: City-St-Zip: SEMINOLE, FL 33706 City-St-Zip: () Delete Title: VΡ Title: () Change () Addition KEIF, JUDY Name: Name: Address: 750 CAPRI CIR. Address: City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: Title: Title: SEC () Delete () Change () Addition HURT, LEIGH ANNE Name: Name: 10237 TARPON DR. Address: Address: TREASURE ISLAND, FL 33706 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RYAN F. WORKMAN PRES 03/12/2008