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Form 5 February 14, 2008						
FORM 5			OMB AP	PROVAL		
UNITED STATES	S SECURITIES AND EXCHANGE	COMMISSION	OMB Number:	3235-0362		
Check this box if no longer subject	Washington, D.C. 20549					
to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	FATEMENT OF CHANGES IN BEN OWNERSHIP OF SECURITIES	Estimated a burden hour response	•			
Form 3 Holdings Section 17(a) of the	Section 16(a) of the Securities Exchang Public Utility Holding Company Act of of the Investment Company Act of 19	f 1935 or Section				
1. Name and Address of Reporting Person <u>*</u> PAULL MITCHELL S	2. Issuer Name and Ticker or Trading Symbol AARON RENTS INC [RNT]	Issuer	nship of Reporting Person(s) to			
(Last) (First) (Middle) 309 E. PACES FERRY ROAD, N.E.	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007	Director XOfficer (give t below)		Owner r (specify		
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi (check	nt/Group Repo applicable line)	rting		

ATLANTA, GAÂ 30305-

AARON RENTS INC

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Aaron Rnts Cl. A Com	Â	Â	Â	Â		Â	1,155	D	Â		
Aaron Rnts Com Stock	12/31/2007	Â	G	30	A	\$ 19.24	6,420	D	Â		
Aaron Rnts Com	12/31/2007	Â	L	60.7718	Α	\$ 19.24	3,059.0497	Ι	By: 401(k)		

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Stock								
Aaron Rnts Com Stock	Â	Â	Â	Â	Â	7,614	Ι	By: Children

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	Number E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secu (Instr
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Aaron Rnts Com Stock Option	\$ 6.69	Â	Â	Â	Â	Â	12/22/2003	12/22/2010	Aaron Rnts Com Stock	57,500	Â
Aaron Rnts Com Stock Option	\$ 21.14	Â	Â	Â	Â	Â	11/13/2010	11/13/2017	Aaron Rnts Com Stock	7,500	Â
Aaron Rnts Com Stock Option	\$ 21.84	Â	Â	Â	Â	Â	10/01/2007	10/01/2014	Aaron Rnts Com Stock	15,000	À
Stock Options (Right to buy)	\$ 22.47	Â	Â	Â	Â	Â	05/16/2008	05/16/2015	Aaron Rnts Com Stock	1,600	Â
Stock Options (Right to	\$ 24.94	Â	Â	Â	Â	Â	08/15/2008	08/15/2015	Aaron Rnts Com	1,920	Ĩ

buy)

Stock

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
PAULL MITCHELL S 309 E. PACES FERRY ROAD, N.E. ATLANTA, GA 30305-	Â	Â	Senior Vice President	Â				
Signatures								
Aleksandra T. Nearing, by Power of Atto Paull	itchell S.	02/14/200	08					
<u>**</u> Signature of Reporting Person		Date						
Evaluation of Deenen								

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) The amount of securities beneficially owned has been adjusted for the 3 for 2 stock split distributed by the issuer on 8/15/2003.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.