

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000754

Entity Name: FASTENAL COMPANY

FILED
Apr 30, 2012
Secretary of State

Current Principal Place of Business:

2001 THEURER BLVD.
WINONA, MN 55987

New Principal Place of Business:

Current Mailing Address:

2001 THEURER BLVD.
P.O. BOX 1206
WINONA, MN 55987

New Mailing Address:

FEI Number: 41-0948415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33334 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: OBERTON, WILLARD
Address: 2001 THEURER BLVD.
City-St-Zip: WINONA, MN 55987

Title: EVP
Name: LUNDQUIST, NICHOLAS
Address: 2001 THEURER BLVD.
City-St-Zip: WINONA, MN 55987

Title: EVP
Name: HEIN, LELAND
Address: 2001 THEURER BLVD.
City-St-Zip: WINONA, MN 55987

Title: COBD
Name: KIERLIN, ROBERT
Address: 2001 THEURER BLVD.
City-St-Zip: WINONA, MN 55987

Title: D
Name: SLAGGIE, STEPHEN
Address: 2001 THEURER BLVD.
City-St-Zip: WINONA, MN 55987

Title: TCFO
Name: FLORNESS, DANIEL
Address: 2001 THEURER BLVD.
City-St-Zip: WINONA, MN

I hereby 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 all other like empowered.

SIGNATURE: DANIEL FLORNESS

MR.

04/30/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date