

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 137269

FILED  
Feb 21, 2011  
Secretary of State

Entity Name: HI-WAY AUTO PARTS CO.

**Current Principal Place of Business:**

4509 LAFAYETTE ST  
MARIANNA, FL 32446 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9579  
PANAMA CITY BEACH, FL 324179579 US

**New Mailing Address:**

FEI Number: 59-0292027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JENINGS, FOSTER L.  
6120 BEACH DRIVE  
PANAMA CITY BEACH, FL 32408 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: PD  
Name: PHILLIPS, MONICA J.  
Address: 1511 CONNECTICUT AVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: VD  
Name: JENINGS, FOSTER L. JR.  
Address: 1907 SCARLETT BLVD  
City-St-Zip: LYNN HAVEN, FL 32444

Title: STD  
Name: JENINGS, RAYMOND K.  
Address: 3305 COUNTRY CLUB DR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: C  
Name: JENINGS, FOSTER L.  
Address: 6120 BEACH DRIVE  
City-St-Zip: PANAMA CITY, FL 324083529

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: FOSTER JENINGS

PRES

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date