
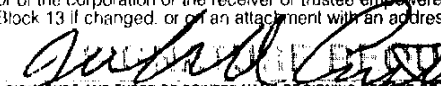


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 231741 (0) 1. Corporation Name EARLE G. WARD AUTO PARTS, INC.					
Principal Place of Business 8395 LAAMISTAD PO BOX 126 FERN PARK FL 32730 US			Mailing Address P. O. BOX 300792 PO BOX 126 FERN PARK FL 32730-0792 US		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified 12/19/1959 3a. Date of Last Report 03/19/1996 4. FEI Number 59-0896699 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CRYSTAL, JOHN A., JR. 8395 LA AMISTAD COVE FERN PARK FL 32730				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small> DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CRYSTAL, BARBARA		1.2 NAME		
STREET ADDRESS	8395 LA AMISTAD COVE		1.3 STREET ADDRESS		
CITY - ST - ZIP	FERN PARK FL		1.4 CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CRYSTAL, JOHN A., JR		2.2 NAME		
STREET ADDRESS	8395 LA AMISTAD COVE		2.3 STREET ADDRESS		
CITY - ST - ZIP	FERN PARK FL		2.4 CITY - ST - ZIP		
TITLE	PVT	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CRYSTAL, JOHN A., JR		3.2 NAME		
STREET ADDRESS	8395 LAAMISTAD COVE		3.3 STREET ADDRESS		
CITY - ST - ZIP	FERN PARK FL		3.4 CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CRYSTAL, MILDRED H		4.2 NAME		
STREET ADDRESS	9252 SAN JOSE BLVD		4.3 STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE, FL 00000		4.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE:  Date: 4/4/97 407-830-5655					

CR2E034 (9/96)