

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 237710

FILED  
Jan 23, 2012  
Secretary of State

**Entity Name:** MARIANNA AUTO PARTS & SUPPLY COMPANY, INC.

**Current Principal Place of Business:**

4486 LAFAYETTE ST  
MARIANNA, FL 32446 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5837  
MARIANNA, FL 32447 US

**New Mailing Address:**

**FEI Number:** 59-0907650      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

STEVENS, MARY CATHERINE  
2513 SPRING CREEK ROAD  
MARIANNA, FL 32448 US

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

STEVENS, MARY C  
2513 SPRING CREEK ROAD  
MARIANNA, FL 32448 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: CATHIE STEVENS

01/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DS  
Name: STEVENS, RONALD L  
Address: 2513 SPRING CREEK ROAD  
City-St-Zip: MARIANNA, FL 32448

Title: VD  
Name: SPENCE, WALTER W JR  
Address: 2774 INDIAN SPRING RD  
City-St-Zip: MARIANNA, FL 32446

Title: TD  
Name: SPENCE, ELIZABETH H  
Address: 2774 INDIAN SPRING RD  
City-St-Zip: MARIANNA, FL 32446

Title: PD  
Name: STEVENS, MARY C.  
Address: 2513 SPRING CREEK ROAD  
City-St-Zip: MARIANNA, FL 32448

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: MARY CATHERINE STEVENS

PRES

01/23/2012

Electronic Signature of Signing Officer or Director

Date