

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 316161

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: AUTO SUPPLY OF STUART INC

## Current Principal Place of Business:

745 SE MONTEREY ROAD  
STUART, FL 34994

## New Principal Place of Business:

## Current Mailing Address:

745 SE MONTEREY ROAD  
STUART, FL 34994

## New Mailing Address:

FEI Number: 59-1167941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SLOAT, A. WAYNE  
745 SE MONTEREY ROAD  
STUART, FL US

## Name and Address of New Registered Agent:

SLOAT, A. WAYNE  
745 SE MONTEREY ROAD  
STUART, FL 34994 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: ARNOLD W SLOAT

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: SLOAT, ARNOLD W  
Address: 745 SE MONTEREY RD  
City-St-Zip: STUART, FL 34994

Title: VD ( ) Delete  
Name: SLOAT, GARY C  
Address: 3694 SW WOODBRIAR LANE  
City-St-Zip: PALM CITY, FL

Title: T ( ) Delete  
Name: SMITH, KEVIN  
Address: 1440 SE 23RD ST  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D ( ) Delete  
Name: SLOAT, ARNOLD H  
Address: 545 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: SLACT, SOPHIE  
Address: 545 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: DAVIES, ROBERT  
Address: 1360 NE HILLCREST LANE  
City-St-Zip: JENSEN BEACH, FL 34957

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARNOLD W SLOAT

PRRE

01/30/2009

Electronic Signature of Signing Officer or Director

Date