

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 352574 (8)

1. Corporation Name

R & W AUTO PARTS INC



Principal Place of Business

Mailing Address

11531 HWY 41 S
11531 HIGHWAY 41 SOUTH
GIBSONTON FL 33534
US

PO BX 1027
~~ALLENDALE COUNTY~~
GIBSONTON FL 33534
US

2. Principal Place of Business

2a. Mailing Address

21 11531 Hwy 41 S.

26 P.O. BOX 1027

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State
23 Gibsonton, Fla. 33534

City & State
28 Gibsonton, Fla. 33534

Zip

Country

Zip

Country

24 33534

25 Hillsborough

29 33534

30 Hillsborough

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/22/1969

3a. Date of Last Report

01/20/1995

4. FEI Number

59-1270740

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

TANNER, DONALD T
8620 MAGNOLIA DRIVE
GIBSONTON FL 33534

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME TANNER, DONALD T.
STREET ADDRESS 8620 MAGNOLIA DRIVE
CITY-ST-ZIP GIBSONTON FL ☐ DELETE

TITLE VD
NAME TANNER, BETTY A
STREET ADDRESS 8620 MAGNOLIA DRIVE
CITY-ST-ZIP GIBSONTON FL ☐ DELETE

TITLE S
NAME HODGE MRS
STREET ADDRESS 112 KENNEDY BOULEVARD
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/96

813-677-7171

Date Daytime Phone #

CR2E034 (12/95)