2007 FOR PROFIT CORPORATION

FILED -ANNUAL REPORT Mar 05, 2007 08:00 AN **DOCUMENT # 521342 Secretary of State** 1. Entity Name WHERRELL AUTO PARTS, INC. Principal Place of Business Mailing Address 107 SW 2ND ST 107 SW 2ND ST OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34974 US 02282007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1712038 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHERRELL, MARVIN W. JR. DO NOT WRITE 107 S.W. 2ND ST. OKEECHOBEE, FL 34974 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150,00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TIME NAME WHERRELL, MARVIN, JR STREET ADDRESS 107 SW 2ND ST U00000655147 OKEECHOBEE, FL CITY-ST-ZIP 00000, 03/13/07-80094-016 150.00 TIBLE WHERRELL, SANDRA M NAME STREET ADDRESS 107 SW 2ND ST OKEECHOBEE, FL CITY-ST-ZIP 00000 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR