

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 595946

1. Entity Name

H & D AUTO PARTS COMPANY OF MOUNT DORA, INC.



Principal Place of Business

111 HIGHLAND STREET
MOUNT DORA FL 32757

Mailing Address

111 HIGHLAND STREET
MOUNT DORA FL 32757

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-1871074

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FEDORKA, DOROTHY D
111 SOUTH HIGHLAND AVENUE
MOUNT DORA FL 32757

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VP ☐ Delete
NAME FEDORKA, DOROTHY D
STREET ADDRESS 1931 ABRAMS ROAD
CITY- ST- ZIP EUSTIS FL 32726

TITLE S ☐ Delete
NAME COMER, DEBORAH F
STREET ADDRESS 1560 LAKE VIEW RD.
CITY- ST- ZIP EUSTIS FL 32726

TITLE T ☐ Delete
NAME BASS, LISA F
STREET ADDRESS 940 LAKE GRACIE DR.
CITY- ST- ZIP EUSTIS FL 32726

TITLE P ☐ Delete
NAME FEDORKA, JOSEPH M
STREET ADDRESS 1931 ABRAMS ROAD
CITY- ST- ZIP EUSTIS FL 32726

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Add
NAME
STREET ADDRESS
CITY- ST- ZIP
UN00000431939
02/23/06-80048-011 150.00

TITLE ☐ Change ☐ Add
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STREET ADDRESS
CITY- ST- ZIP

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NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Dorothy D Fedorka Dorothy D. FEDORKA 2-9-06 352-357-4979