2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

CITY-ST-7IP

STREET ADDRESS

CITY-S1-7IP

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NAME

FILED Feb 05, 2007 08:00 AM **DOCUMENT # 595946 Secretary of State** H & D AUTO PARTS COMPANY OF MOUNT DORA, INC. Principal Place of Business Mailing Address 111 HIGHLAND STREET 111 HIGHLAND STREET MOUNT DORA FL 32757 MOUNT DORA FL 32757 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, otc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-1871074 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FEDORKA, DOROTHY D Street Addross (P.O. Box Numbor is Not Accoptable) 111 SOUTH HIGHLAND AVENUE MOUNT DORA FL 32757 Zip Code City 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 r applicable DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HILE C Delete IIILE ☐ Change ☐ Addition FEDORKA, DOROTHY D NAME NAME U00000623023 1931 ABRAMS ROAD STREET ADDRESS STREET ADDRESS 02/13/07-80050-005 150.00 EUSTIS FL 32726 CITY-ST-7IP CITY-ST-ZIP TULLE ☐ Delete III Change Addition COMER, DEBORAH F NAME NAME 1560 LAKE VIEW RD. STREET ADDRESS STREET ADDRESS EUSTIS FL 32726 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete IIILE Change Addition BASS, LISA F NAME NAME STREET ADDRESS 940 LAKE GRACIE DR. STREET ADDRESS CITY-ST-ZIP EUSTIS FL 32726 CITY - ST- ZIP TITLE. Delete HHE Change Addition FEDORKA, JOSEPH M. NAME NAME 1931 ABRAMS ROAD STREET ADDRESS STRUET ADDRESS EUSTIS FL 32726 CITY-ST-ZIP CITY - ST- ZIP DHE. ☐ Delete IIIE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes, 1 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 eath, 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.

CITY-ST-7IP

STREET ADDRESS

CHY-SI-7IP

☐ Change

Addition

TITLE

NAME

Delete

SIGNATURE: