2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 21, 2002 8:00 am Secretary of State DOCUMENT # F01000004917 1. Entity Name 05-21-2002 90863 027 ***150.00 CARQUEST AUTO PARTS OF DUNEDIN FL, INC. Principal Place of Business Mailing Address 2635 E. MILLBROOK ROAD P.O. BOX 26006 RALEIGH NC 27604 RALEIGH NC 27611 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For *56-2265704* **APPLIED-FOR** Not Applicable Zip \$8.75 Additional Country Zip Country 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) .1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME LAVRACK, WAYNE D STREET ADDRESS STREET ADDRESS 2635 E. MILLBROOK ROAD CITY-ST-ZIP CITY-ST-7IP RALEIGH NC 27604 Delete ٧Ŋ Addition TITLE John Gardner NAME NAME KOTCHER, FREDERIC S 2635 Millbrook Rd STREET ADDRESS STREET ADDRESS 2635 E. MILLBROOK ROAD Raleigh, NC 27604 CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27604 TITI F ☐ Delete TITLE Change Addition NAME NAME GARRISON, CHARLES E STREET ADDRESS STREET ADDRESS 2635 E. MILLBROOK ROAD CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27604 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 emporated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 1 6 2002

919-573-3000