## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## F01000004921 DOCUMENT #



## Apr 21, 2003 8:00 am Secretary of State

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CARQUEST AUTO PARTS OF RIVIERA BEACH 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. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 56-2265712 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change Addition D Delete TITLE LAVRACK, WAYNE D NAME NAME 2635 E. MILLBROOK ROAD STREET ADDRESS STREET ADDRESS RALEIGH NC 27604 CITY-ST-ZIP CITY-ST-ZIP TITLE VD ☐ Delete TITLE Change Addition GARDNER, JOHN NAME NAME 2635 E. MILLBROOK ROAD STREET ADDRESS STREET ADDRESS RALEIGH NC 27604 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ' Change Addition GARRISON, CHARLES E NAME NAME 2635 E. MILLBROOK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP RALEIGH NC 27604 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE **GUIRLINGER, RICHARD** NAME NAME STREET ADDRESS 2635 MILLBROOK RD STREET ADDRESS CITY-ST-ZIP RALEIGH NC 27604 CITY-ST-ZIP

12. 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 the stee 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 attach ddress, with all other like empowered

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

**SIGNATURE:** 

TITLE

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

JIRCHARLES E. GARRISON 4 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

Delete

☐ Delete

Change

Change

☐ Addition

Addition