

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004647

Entity Name: WELLER AUTO PARTS, INC.

FILED
Mar 26, 2009
Secretary of State

Current Principal Place of Business:

10330 CHEDOAK CT.
UNIT 201-205
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

1500 GEZON PKWY SW
GRAND RAPIDS, MI 49509

New Mailing Address:

FEI Number: 38-1856776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WELLER, HARRY R
Address: 1500 GEZON PKWY SW
City-St-Zip: GRAND RAPIDS, MI 49509

Title: V () Delete
Name: WELLER, JOHN M
Address: 1500 GEZON PKWY SW
City-St-Zip: GRAND RAPIDS, MI 49509

Title: S () Delete
Name: WELLER, CHRISTOPHER J
Address: 1500 GEZON PKWY SW
City-St-Zip: GRAND RAPIDS, MI 49509

Title: T () Delete
Name: WELLER, PAUL A
Address: 1500 GEZON PKWY SW
City-St-Zip: GRAND RAPIDS, MI 49509

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL A. WELLER

TREA

03/26/2009

Electronic Signature of Signing Officer or Director

Date