2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# F09114

Entity Name: INDUSTRIAL PARTS SUPPLY, INC.

Current Principal Place of Business:

115 INDUSTRIAL BLVD.
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

PO BOX 37368
PENSACOLA, FL 325260368

New Mailing Address:

FEI Number: 59-2050994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MADDEN, CAROL E
115 INDUSTRIAL BLVD.
PENSACOLA, FL 32505 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: DP ( ) Delete
Name: MADDEN, JOSEPH T
Address: 2340 SILVERSIDE LOOP
City-St-Zip: PENSACOLA, FL

Title: D ( ) Delete
Name: MADDEN, CAROL
Address: 2340 SILVERSIDE LOOP
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MADDEN, JOSEPH T
Address: 2340 SILVERSIDE LOOP
City-St-Zip: PENSACOLA, FL 32526

Title: D (X) Change ( ) Addition
Name: MADDEN, CAROL
Address: 2340 SILVERSIDE LOOP
City-St-Zip: PENSACOLA, FL 32526

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: CAROL E MADDEN PRES 04/30/2008

Electronic Signature of Signing Officer or Director — Date