

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001745

Entity Name: WELDON PARTS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

2515 SHADER RD
STE 7
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

711 W. CALIFORNIA ST
OKLAHOMA CITY, OK 73102

New Mailing Address:

PO BOX 2115
OKLAHOMA CITY, OK 73101

FEI Number: 73-0980791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEMBREE, JESS E III
2515 SHADER ROAD #7
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

BEVACQUA, ANGELO
2515 SHADER ROAD #7
ORLANDO, FL 32804 US

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: ANGELO BEVACQUA

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: SETTLES, DAVID
Address: 3301 NW 36TH ST.
City-St-Zip: OKLAHOMA CITY, OK

Title: S () Delete
Name: RIDER, EMILIE
Address: 7009 GREEN MEADOWS LANE
City-St-Zip: OKLAHOMA CITY, OK 73132

Title: VP () Delete
Name: SETTLES, DARYLE
Address: 2804 N MCMILLAN
City-St-Zip: BETHANY, OK

Title: T () Delete
Name: RIDER, DAVID M.
Address: 7009 GREEN MEADOW LANE
City-St-Zip: OKLAHOMA CITY, OK 73132

Title: AT (X) Delete
Name: WHEELER, EDDIE E
Address: 7012 S VILLA
City-St-Zip: OKLAHOMA CITY, OK

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:

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: DAVID SETTLES

CP

04/29/2009

Electronic Signature of Signing Officer or Director

Date