2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005
Secretary of State

DOCUMENT# F95000002310

Entity Name: AUTO PARTS OF DAYTONA, INC.

Current Principal Place of Business:

945 W INTL SPEEDWAY BLVD
DAYTONA BEACH, FL 321143566

New Principal Place of Business:

Current Mailing Address:

945 W INTL SPEEDWAY BLVD
DAYTONA BEACH, FL 321143566

New Mailing Address:

FEI Number: 59-3304342 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONER, THOMAS W
945 W INTL SPEEDWAY BLVD.
DAYTONA BEACH, FL 32114 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:	PSDT	( ) Delete
Name:	STONER, THOMAS W	
Address:	945 W INTL SPEEDWAY BLVD	
City-St-Zip:	DAYTONA BEACH, FL 321143566	
Title:	ASD	( ) Delete
Name:	FOSTER, MICHAEL	
Address:	1090 HAINES STREET	
City-St-Zip:	JACKSONVILLE, FL 32206	
Title:	V	( ) Delete
Name:	STONER, WADE	
Address:	945 W INTL SPEEDWAY BLVD	
City-St-Zip:	DAYTONA BEACH, FL 32114	
Title:	V	( ) Delete
Name:	HANCOCK, THOMAS E	
Address:	2999 CIRCLE 75 PKWY	
City-St-Zip:	ATLANTA, GA 30339	
Title:	D	( ) Delete
Name:	STONER, NELLY B	
Address:	945 W INTL SPEEDWAY BLVD	
City-St-Zip:	DAYTONA BEACH, FL 32114	

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 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 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: THAMAS W. STONER PSDT 02/03/2005

Electronic Signature of Signing Officer or Director — Date