

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002310

FILED
Apr 21, 2009
Secretary of State

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: D (X) Delete
Name: STONER, NELLY B
Address: 945 W INTL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V (X) Delete
Name: HANCOCK, THOMAS E
Address: 2999 CIRCLE 75 PKWY
City-St-Zip: ATLANTA, GA 30339

Title: VD (X) 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: VD (X) Change () Addition
Name: STONER, NELLY B
Address: 945 W INTL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

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: THOMAS W. STONER

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date