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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F9600000087 (4)

CARQUEST AUTO PARTS OF TALLAHASSEE NORTH FL. INC

Mailing Address Principal Place of Business C/O GENERAL PARTS. INC. C/O GENERAL PARTS, INC. 2635 MILLBROOK ROAD 2635 MILLBROOK ROAD **RALEIGH NC 27604-2809** RALEIGH NC 27604 3a. Date of Last Report 3. Date Incorporated or Qualified 01/04/1996 2a. Mailing Address 2. Principal Place of Business Applied For 26 Not Applicable 21 59-3345944 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be Cily & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intengible tax under s. 199.032, 30 Florida Statutes Yes 🔲 No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 RA City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent 1 am fam har with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type dior printed name of registered agen, and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)Addition DELETE Change TITLE 11 TITLE NAME 1.2 NAME KOTCHER, FREDERIC S 1.3 STREET ADDRESS STREET ADDRESS 2635 MILLBROOK ROAD 1.4 CITY - ST - ZIP CITY - ST - ZIP RALEIGH NC 27604 DELETE Change ___ Addition 2.1 TITLE TITLE DV NAME 22 NAME LAVRACK, WAYNE STREET ADDRESS 23 STREET ADDRESS 2635 MILLBROOK ROAD 2.4 CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27604 DELETE Change Addition 3.1 TITLE TITLE SD 3.2 NAME NAME GRAHAM, M C 3.3 STREET ADDRESS STREET ADDRESS 2635 MILLBROOK ROAD CITY ST-ZIP 3.4. CITY-ST-ZIP RALEIGH NC 27604 DELETE Change Addition TITLE 4.1 TITLE TD 4. 2 NAME NAME GARDNER, JOHN W 4.3 STREET ADDRESS STREET ADDRESS 2635 MILLBROOK ROAD 4.4 CITY - ST - ZIP CITY ST ZIP RALEIGH NC 27604 DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 6.1 TITLE Change TITLE 62 NAME NAME

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiper strustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, onto a parachment with an address.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

IGNATURE AND TYPED OF PRINTED NAME OF BRINING OFFICER OR DIRECTOR

Daytime Phone #

FILED

Feb 03 1997 8:00am

Secretary of State