FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1999**	FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

**FILED
Mar 03, 1999 8:00 am
Secretary of State**

03-03-1999 90052 015 ***150.00

DOCUMENT # F96000000260

1. Corporation Name

CARQUEST AUTO PARTS OF MILLVILLE FL, INC.

Principal Place of Business	Mailing Address
% GENERAL PARTS. INC. 2635 MILLBROOK ROAD RALEIGH NC 27604	% GENERAL PARTS. INC. 2635 MILLBROOK ROAD RALEIGH NC 27604

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
01/16/1996

2. Principal Place of Business	21	2a. Mailing Address	26	4. FEI Number **59-3345213**	Applied For
					Not Applicable
Suite, Apt. #, etc.	22	Suite, Apt. #, etc.	27	5. Certifcate of Status Desired ☐	**$8.75** Additional Fee Required
City & State	23	City & State	28	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip	Country 25	Zip	Country 30	8. This corporation owes the current year Intangible Personal Property Tax.	☒ Yes ☐ No
24		29			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City	FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DT NAME GARDNER, JOHN W STREET ADDRESS 2635 MILLBROOK ROAD CITY-ST-ZIP RALEIGH NC 27604	☒ DELETE	1.1 TITLE **Treasurer** 1.2 NAME **Richard B. Guirlinger** 1.3 STREET ADDRESS **2635 Millbrook Rd.** 1.4 CITY-ST-ZIP **Raleigh, NC 27604**	☐ Change ☒ Addition
TITLE DV NAME LAVRACK, WAYNE STREET ADDRESS 2635 MILLBROOK ROAD CITY-ST-ZIP RALEIGH NC 27604	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE S NAME GARRISON, CHARLES E STREET ADDRESS 2635 MILLBROOK ROAD CITY-ST-ZIP RALEIGH NC 27604	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE P NAME KOTCHER, FREDERIC S STREET ADDRESS 2635 MILLBROOK ROAD CITY-ST-ZIP RALEIGH NC 27604	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing 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 receiver or trustee 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES E. GARRISON SECRETARY
1/26/99
Date
919-513-3230
Daytime Phone #

CR2E034 (11/98)