

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

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

03-03-1999 90052 020 \*\*\*150.00

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<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F96000005493**

1. Corporation Name

CARQUEST AUTO PARTS OF JOHN SIMMS PKWY. FL, INC.



Principal Place of Business % GENERAL PARTS, INC. 2635 MILLBROOK RD RALEIGH NC 27604	Mailing Address % GENERAL PARTS, INC. 2635 MILLBROOK RD RALEIGH NC 27604
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 10/22/1996 4. FEI Number 59-3398260 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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	TD	1.1 TITLE	Treasurer
NAME	GARDNER, JOHN W	1.2 NAME	Richard B. Guiringer
STREET ADDRESS	2635 MILLBROOK RD	1.3 STREET ADDRESS	2635 Millbrook Rd.
CITY-ST-ZIP	RALEIGH NC 27604	1.4 CITY-ST-ZIP	Raleigh, NC 27604
TITLE	VD	2.1 TITLE	
NAME	LAVRACK, WAYNE	2.2 NAME	
STREET ADDRESS	2635 MILLBROOK RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	RALEIGH NC 27604	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	GARRISON, CHARLES E	3.2 NAME	
STREET ADDRESS	2635 MILLBROOK RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	RALEIGH NC 27604	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	
NAME	KOTCHER, FREDERIC S	4.2 NAME	
STREET ADDRESS	2635 MILLBROOK RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	RALEIGH NC 27604	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 in 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

Date

Daytime Phone #

1/26/99 919-593-3230

CR2E034 (11/98)