

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J94164

FILED
Apr 27, 2007
Secretary of State

Entity Name: WHOLESALE AUTO PARTS OF WINTER HAVEN, INC.

Current Principal Place of Business:

2610 RECKER HWY
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

PO BOX 7192
WINTER HAVEN, FL 33883 US

New Mailing Address:

FEI Number: 59-2844150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELKINS, JAMES E.
2695 RECKER HWY
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

ELKINS, JAMES E.
2610 RECKER HWY
WINTER HAVEN, FL 33880 US

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: JAMES E. ELKINS

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ELKINS, JAMES E.,
Address: 2559 PARTRIDGE DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VD () Delete
Name: WELKER-ELKINS, SANDR, A J.
Address: 2559 PARTRIDGE DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES E. ELKINS

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date