

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90046 033 ***150.00

DOCUMENT # K58137

1. Entity Name
BAKER PARTS AND SUPPLY, INC



Principal Place of Business
**1304 GEORGIA AVE
BAKER, FL 32531 US**

Mailing Address
**PO BOX 157
BAKER, FL 32531 US**



03212007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2925982

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BRUNSON, JOSEPH M.
1480 SKYRANCH LANE
BAKER, FL 32531**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

00000000000000000000
04/09/07 800241012 50.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCT BRUNSON, JOSEPH M. 1480 SKYRANCH LANE BAKER, FL 32531
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV BRUNSON, WILLIAM D. 7589 PEACOCK RD. BAKER, FL 32531
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS BRUNSON, ROCHELLE 1480 SKYRANCH LANE BAKER, FL 32531
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William D. Brunson* **WILLIAM D. BRUNSON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #