

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90061 001 ***750.00

DOCUMENT # K85880



1. Entity Name
**LKQ COPHER SELF SERVICE AUTO
PARTS-CLEARWATER INC.**

Principal Place of Business

**120 N. LASALLE ST.
CHICAGO, IL 60602 US**

Mailing Address

**P.O. BOX 1408
BRANDON, FL 33509 US**

66429694

2. Principal Place of Business

Suite, Apt. #, etc.

Suite 3300

City & State

Zip

Country

3. Mailing Address

120 N. Lasalle St.

Suite, Apt. #, etc.

Suite 3300

City & State

Chicago, IL

Zip

60602

Country

US

07012004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-2933437

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME COPHER, RONALD
STREET ADDRESS 861 SETON COVE WAY
CITY-ST-ZIP TAMPA, FL 33602

TITLE TSD ☒ Delete
NAME COPHER, RICHARD
STREET ADDRESS 912 RIVER RAPIDS AVE.
CITY-ST-ZIP BRANDON, FL

TITLE VP ☒ Delete
NAME HUDSON, ERVIN
STREET ADDRESS 401 VALRICO-SEFFNER ROAD
CITY-ST-ZIP VALRICO, FL

TITLE VP ☒ Delete
NAME WAGNER, JAMES
STREET ADDRESS 1811 NOVA DRIVE
CITY-ST-ZIP VALRICO, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Change ☒ Addition
NAME Damron, Leonard A.
STREET ADDRESS 4950 Highway 486
CITY-ST-ZIP Crystal River, FL 34429

TITLE V.P.S. ☐ Change ☒ Addition
NAME Stephen
STREET ADDRESS Tatal, Steven D.
CITY-ST-ZIP 4950 West Highway 486
Crystal River, FL 34429

TITLE D ☐ Change ☒ Addition
NAME Holsten, Joseph M.
STREET ADDRESS 120 N. LaSalle St., Suite 3300
CITY-ST-ZIP Chicago, IL 60602

TITLE D ☐ Change ☒ Addition
NAME Spears, Mark T.
STREET ADDRESS 120 N. LaSalle St., Suite 3300
CITY-ST-ZIP Chicago, IL 60602

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen Tatal

7/6/04

352-746-3011

Date

Daytime Phone #