

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043308

FILED
Apr 22, 2009
Secretary of State

Entity Name: ALL-PRO USED AUTO PARTS, LLC

Current Principal Place of Business:

1715 OLD DIXIE HWY
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 623
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 20-2776608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMMONS, ROBERT O ESQ
1556 SIXTH ST SE
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KELLEY, DERRICK
Address: 1715 OLD DIXIE HWY
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR () Delete
Name: CLEMENTS, D. SCOTT
Address: 1715 OLD DIXIE HWY
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR () Delete
Name: RIFFEL, PHILLIP
Address: 1715 OLD DIXIE HWY
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR () Delete
Name: JOHNSON, TERRY
Address: 1715 OLD DIXIE HWY
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR () Delete
Name: SCOTT, RANDY
Address: 1715 OLD DIXIE HWY
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TERRY JOHNSON

MGR

04/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date