

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000037087

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Entity Name:** BAY AREA AUTO PARTS, LLC

**Current Principal Place of Business:**

7797 PINE FOREST ROAD  
PENSACOLA, FL 325268769

**New Principal Place of Business:**

7797 PINE FOREST ROAD  
PENSACOLA, FL 325268769 US

**Current Mailing Address:**

C/O TRAX TIRES, INC.  
2135 SCHILLINGER ROAD SOUTH  
MOBILE, AL 36695

**New Mailing Address:**

C/O TRAX TIRES, INC.  
2135 SCHILLINGER ROAD SOUTH  
MOBILE, AL 36695 US

**FEI Number:** 20-4673483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** MNGR  
**Name:** ADAMS, D. SHANE  
**Address:** 2135 SCHILLINGER ROAD SOUTH  
**City-St-Zip:** MOBILE, AL 36695 US

**Title:** MNGR  
**Name:** TESCHEL, ROBERT P  
**Address:** 4770 SHANNON PLACE  
**City-St-Zip:** PENSACOLA, FL 32504 US

I hereby 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:** D. SHANES ADAMS

MEMB

02/03/2010

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