

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000801

Entity Name: A-AABLE AUTO PARTS, L.C.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

3600 BOGGY CREEK ROAD
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 420521
KISSIMMEE, FL 34742

New Mailing Address:

FEI Number: 59-3391084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDLIN, WALTER L
1401 PINE ISLAND RD
KISSIMMEE, FL 34742 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: MEM () Delete
Name: MEDLIN, WALTER
Address: 1401 PINE ISLAND RD.
City-St-Zip: KISSIMMEE, FL 34742

Title: MEM () Delete
Name: ALLEN, D L
Address: 1403 GRANDVIEW BOULEVARD
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MEDLIN, WALTER L
Address: 1401 PINE ISLAND RD.
City-St-Zip: KISSIMMEE, FL 34742

Title: MGR (X) Change () Addition
Name: ALLEN, D L
Address: 1403 GRANDVIEW BOULEVARD
City-St-Zip: KISSIMMEE, FL 34744

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: WALTER MEDLIN

MGR

04/28/2009

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