

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90424 017 ****50.00

DOCUMENT # M01000002487

1. Entity Name
HI-TECH PARTS, LLC



Principal Place of Business
**4100 CORPORATE SQUARE, UNIT #135
NAPLES, FL 34104**

Mailing Address
**4100 CORPORATE SQUARE, UNIT #135
NAPLES, FL 34104**

20010860



01172006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3508669

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SNIDER, KRISTAL W
4100 CORPORATE SQUARE
UNIT 135
NAPLES, FL 34104**

**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 _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SNIDER, MARK A 4100 CORPORATE SQUARE, UNIT #135 NAPLES, FL 34104
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SNIDER, KRISTAL W 4100 CORPORATE SQUARE, UNIT #135 NAPLES, FL 34104
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IN THIS SPACE**

11. 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 is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/23/06

Date

Daytime Phone #