

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000158863

**FILED**  
**Oct 10, 2011**  
**Secretary of State**

**Entity Name:** MACIAS & SONS AUTO PARTS, INC.

**Current Principal Place of Business:**

5615 TAYLOR RD  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

5615 TAYLOR RD  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 20-3886017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUINN, JEFFREY C  
307 AIRPORT ROAD NORTH  
NAPLES, FL 34104 US

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

MACIAS, NANCY  
5615 TAYLOR ROAD  
NAPLES, FL 34109 US

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: NANCY MACIAS

10/10/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MACIAS, FILBERTO JR  
Address: 6861 LIVINGSTON WOODS LANE  
City-St-Zip: NAPLES, FL 34109 US

Title: VP  
Name: MACIAS, CARLOS M  
Address: 1251 SAINT CLAIR SHORES RD  
City-St-Zip: NAPLES, FL 34104 US

Title: T  
Name: MACIAS, NANCY  
Address: 6861 LIVINGSTON WOODS LN  
City-St-Zip: NAPLES, FL 34109 US

Title: S  
Name: MACIAS, DONNA M  
Address: 1251 SAINT CLAIR SHORES RD  
City-St-Zip: NAPLES, FL 34104 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NANCY MACIAS

TREA

10/10/2011

Electronic Signature of Signing Officer or Director

Date