

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13704

Entity Name: CCC PARTS COMPANY

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

420 S 145TH E AVE.
TULSA, OK 74158

New Principal Place of Business:

3600 WEST LAKE AVE.
GLENVIEW, IL 60026 US

Current Mailing Address:

PO BOX 582890
TULSA, OK 74158

New Mailing Address:

3600 WEST LAKE AVE.
GLENVIEW, IL 60026 US

FEI Number: 73-1292734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARDIN, DONALD
Address: 1901 N. SHERIDAN
City-St-Zip: TULSA, OK 74158

Title: VP () Delete
Name: STIPES, ROBERT
Address: 420 S. 145TH E. AVE
City-St-Zip: TULSA, OK 74158

Title: S (X) Delete
Name: ELLIS, RANDY
Address: 1901 N. SHERIDAN
City-St-Zip: TULSA, OK 74158

Title: AS (X) Delete
Name: SELVIDGE, SHIRLEY
Address: 420 S 145TH E.AVE.
City-St-Zip: TULSA, OK 74158

Title: D (X) Delete
Name: KLEIN, JOSEPH M
Address: 1901 N SHERIDIAN
City-St-Zip: TULSA, OK 74115[

Title: AS (X) Delete
Name: ZIMMERMAN, JERRY
Address: 525 S. MAIN
City-St-Zip: TULSA, OK 74103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARTEL, ROLAND
Address: 3600 WEST LAKE AVE.
City-St-Zip: GLENVIEW, IL 60026 US

Title: T (X) Change () Addition
Name: ONO, LEANNE
Address: 3600 WEST LAKE AVE.
City-St-Zip: GLENVIEW, IL 60026 US

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 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 an address, with all other like empowered.

SIGNATURE: LEANNE ONO

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04/21/2009

Electronic Signature of Signing Officer or Director

Date