

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P20177

1. Entity Name

THE PEP BOYS-MANNY, MOE & JACK, INC.



Principal Place of Business

3111 WEST ALLEGHENY AVE
PHILADELPHIA, PA 19132-1116 US

Mailing Address

3111 WEST ALLEGHENY AVE
PHILADELPHIA, PA 19132-1116 US



04132006 No Chg-P CR2E034 (11/05)

4. FEI Number

23-0962915

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

**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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	STEVENSON, LAWRENCE N
STREET ADDRESS	3111 W ALLEGHENY AVE
CITY-ST-ZIP	PHILADELPHIA, PA 19132
TITLE	T
NAME	MCELROY, BERNARD K
STREET ADDRESS	311 W. ALLEGHENY AVE.
CITY-ST-ZIP	PHILADELPHIA, FL 191321116
TITLE	VO
NAME	PAGE, MARK L
STREET ADDRESS	3111 WEST ALLEGHENY AVE
CITY-ST-ZIP	PHILADELPHIA, PA 191321116
TITLE	S
NAME	ZUCKERMAN, BRIAN D
STREET ADDRESS	3111 W. ALLEYHENY AVE.
CITY-ST-ZIP	PHILADELPHIA, PA 191321
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UN00000548087
05/12/06-80051-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

[Signature] VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/06 215-430-9203
Date Daytime Phone #