# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 28, 2011**
**Secretary of State**

DOCUMENT# P94000028546

**Entity Name:** DISTRIBUTOR APPLIANCE PARTS, INC.

**Current Principal Place of Business:**

105 HUGHES ST NE
FT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

105 HUGHES ST NE
FT WALTON BEACH, FL 32548

**New Mailing Address:**

**FEI Number: 59-3237212** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

NICOLOPOULOS, CYNTHIA G
23 NORTH ST
MARY ESTHER, FL 32569 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

**OFFICERS AND DIRECTORS:**

Title: P/VP
Name: NICOLOPOULOS, CYNTHIA G
Address: 23 NORTH ST
City-St-Zip: MARY ESTHER, FL 32569

Title: T
Name: PITMAN, JEFFREY D
Address: 21 NORTH ST
City-St-Zip: MARY ESTHER, FL 32569

Title: S
Name: BLACKMON, GREGORY S
Address: 140 WILLOW AVE
City-St-Zip: FREEPORT, FL 32439

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: CYNTHIA NICOLOPOULOS P/VP 01/28/2011

Electronic Signature of Signing Officer or Director Date