

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000048160

1. Entity Name
FERNANDINA AUTO PARTS, INC.



FILED

04 OCT -7 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1485 S 8TH STREET
FERNANDINA BEACH, FL 32034 US

Mailing Address
P.O. BOX 1189
FERNANDINA BEACH, FL 32035 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09232004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3251937

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SOUTHERLAND, JACK
1485 S 8TH STREET
FERNANDINA BEACH, FL 32034

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
SOUTHERLAND, W. JOHNNY
4 WATERFORD LN
SAVANNAH, GA 31411 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
SOUTHERLAND, JACK A
1485 S 8TH STREET
FERNANDINA BEACH, FL 32034 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
SOUTHERLAND, ANGELA G
4 WATERFORD LN
SAVANNAH, GA 31411 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

200041667222
10/07/04--01021--018 **150.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACKIE SOUTHERLAND

Date

Daytime Phone #

10-5-04 261-4044

To Whom it Concerns

Our Company is requesting
a waiver of 400⁰⁰ We did not
the annual report until September

Thank you
Boris C. Senthakumar
261-4044