

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000013585

FILED
Jan 22, 2009
Secretary of State

Entity Name: AUTO SUPPLY OF OKEECHOBEE, INC.

Current Principal Place of Business:

409 N. PARROTT AVE
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

745 SE MONTEREY RD
STUART, FL 34994

New Mailing Address:

FEI Number: 65-0650486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SLOAT, A. WAYNE
745 SE MONTEREY RD.
STUART, FL 34994 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: P () Delete
Name: SLOAT, A. WAYNE
Address: 745 SE MONTEREY RD
City-St-Zip: STUART, FL

Title: VP () Delete
Name: SLOAT, GARY
Address: 745 SE MONTEREY RD
City-St-Zip: STUART, FL

Title: VP () Delete
Name: ADAMO, TONY
Address: 745 SE MONTEREY RD
City-St-Zip: STUART, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: A WAYNE SLOAT

PRES

01/22/2009

Electronic Signature of Signing Officer or Director

Date