

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000068361

1. Entity Name
THE PARTS PROS AUTOMOTIVE WAREHOUSE, INC.



Principal Place of Business
701 MANATEE AVE. EAST
BRADENTON, FL 34208

Mailing Address
701 MANATEE AVE. EAST
BRADENTON, FL 34208



04172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0855380	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRISON, G. JOSEPH
1208 MANATEE AVE. WEST
BRADENTON, FL 34205

DO NOT WRITE
IN THIS SPACE

8. The above named entry 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	PINCUS, DAVID A
STREET ADDRESS	3504 20TH AVE. DR. WEST
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	TD
NAME	MANDERSCHIED, DAVID C
STREET ADDRESS	6803 87TH STREET CIRCLE EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	SD
NAME	BRINN, JAMES T
STREET ADDRESS	4609 44TH AVE., EAST
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000718647
05/01/07-80090-011 150.00

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: David C. Manderscheid David C. Manderscheid 4-18-07 (941) 758-8848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #