

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000082529

Entity Name: PARTS DIRECT, INC.

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

6511 BAYSHORE ROAD
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

1992 MYRTLE BEND
GERMANTOWN, TN 38139

New Mailing Address:

FEI Number: 65-0948743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PC () Delete
Name: ROODHOUSE, DAVE
Address: 222 BLUFFTON RD.
City-St-Zip: RHINELAND, MO 65069

Title: VP () Delete
Name: GANN, DAVE
Address: 206 FAIR RD.
City-St-Zip: PRAIRIE HOME, MO 65068

Title: S () Delete
Name: HABLITZEL, RANDY
Address: 415 S. MARIAN RD.
City-St-Zip: HASTINGS, NE 68901

Title: T () Delete
Name: NITSCH, CHUCK
Address: 1992 MYRTLE BEND
City-St-Zip: GERMANTOWN, TN 38139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HOFFMASTER, RON
Address: HUNTERS RIDGE DRIVE
City-St-Zip: MEAD, CO 80542

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 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: CHUCK NITSCH

T

01/05/2006

Electronic Signature of Signing Officer or Director

Date