2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01435

FILED Mar 31, 2009 Secretary of State

Entity Name: MARK BARBOUR'S CONSOLIDATED AUTO PARTS, INC.

Current Principal Place of Business: New Principal Place of Business:

6346 GREENLAND ROAD 6498 FAYAL DRIVE SOUTH JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32258

Current Mailing Address: New Mailing Address:

6346 GREENLAND ROAD 6498 FAYAL DRIVE SOUTH JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32258

FEI Number: 59-3097682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARBOUR, MARK
6346 GREENLAND ROAD
JACKSONVILLE, FL 32258 US
BARBOUR, MARK
6498 FAYAL DRIVE SOUTH
JACKSONVILLE, FL 32258 US

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: 03/31/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BARBOUR, MARK D, Name: BARBOUR, MARK D,

 Address:
 6346 GREENLAND RD
 Address:
 6498 FAYAL DRIVE SOUTH

 City-St-Zip:
 JACKSONVILLE, FL
 City-St-Zip:
 JACKSONVILLE, FL
 32258

Title: VP () Delete Title: VP (X) Change () Addition Name: MORGAN, SCOTT G Name: MORGAN, SCOTT G

 Name:
 MORGAN, SCOTT G
 Name:
 MORGAN, SCOTT G

 Address:
 6346 GREENLAND RD
 Address:
 6498 FAYAL DRIVE SOUTH

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:
 JACKSONVILLE, FL 32258

Title: TS () Delete Title: TS (X) Change () Addition

 Name:
 BARBOUR, MARK D
 Name:
 BARBOUR, MARK D

 Address:
 6346 GREENLAND RD
 Address:
 6498 FAYAL DRIVE SOUTH

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:
 JACKSONVILLE, FL 32258

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: MARK BARBOUR P 03/31/2009