

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V02642

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** S & W AUTO PARTS OF GRACEVILLE, INCORPORATED

**Current Principal Place of Business:**

5328 COTTON STREET  
GRACEVILLE, FL 32440

**New Principal Place of Business:**

**Current Mailing Address:**

5328 COTTON STREET  
GRACEVILLE, FL 32440

**New Mailing Address:**

**FEI Number:** 59-3099724

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, HAROLD R.  
5112 HWY 77  
GRACEVILLE, FL 32440 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SMITH, HAROLD R.  
Address: 5112 HWY 77  
City-St-Zip: GRACEVILLE, FL 32440

Title: VD  
Name: SMITH, W. KEITH  
Address: 42921 GOLF VIEW DR  
City-St-Zip: CHANTILLY, VA 20152

Title: S  
Name: LEONARD, KIMBERLY R  
Address: 5108 HWY 77  
City-St-Zip: GRACEVILLE, FL 32440

Title: T  
Name: SMITH, JUDITH R  
Address: 5112 HWY 77  
City-St-Zip: GRACEVILLE, FL 32440

I hereby 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 all other like empowered.

SIGNATURE: HAROLD R. SMITH

PRES

03/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date