

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003128

FILED
Apr 27, 2005
Secretary of State

Entity Name: ICRDA PARTS CENTER, INC.

Current Principal Place of Business:

4115 TAGGART CREEK ROAD
CHARLOTTE, NC 28208

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 19348
CHARLOTTE, NC 28219

New Mailing Address:

FEI Number: 56-1494211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: HOWIE, AKIN
Address: 18-2 ROUTE 67
City-St-Zip: SCHAGHTICOKE, NY 12154

Title: S () Delete
Name: KRAMER, STEVE
Address: 2605 METRO BLVD.
City-St-Zip: ST. LOUIS, MO 63043

Title: V () Delete
Name: GILBERTSON, STANLEY
Address: 944 WEST WILSHIRE
City-St-Zip: OKLAHOMA CITY, OK 73116

Title: T () Delete
Name: HORNSTRA, GARY
Address: 4422 WEST ROOSEVELT ROAD
City-St-Zip: HILLSIDE, IL 60162

Title: CNN () Delete
Name: GLENN, JERRY L
Address: 4115 TAGGART CREEK ROAD
City-St-Zip: CHARLOTTE, NC 28208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHAIT, STUART
Address: 1720 A BYBERRY ROAD
City-St-Zip: BENSALEM, PA 19020

Title: S (X) Change () Addition
Name: STILLER, BRYON
Address: 2595 OVERLAND AVE
City-St-Zip: BILLINGS, MT 59102

Title: V (X) Change () Addition
Name: AKIN, HOWIE
Address: 1531 NY ROUTE 67
City-St-Zip: SCHAGHTICOKE, NY 12154

Title: T (X) Change () Addition
Name: BAUER, BOB
Address: 300 NORTH LARCH STREET
City-St-Zip: LANSING, MI 48912

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 Section 119.07(3)(i), 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: JERRY L., GLENN

CNN

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date