

1.) CORPORATION NAME:

Advance Auto Parts, Inc.

DUE DATE: **2/28/2011**

SCC ID NO: **F1499872**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY
SARAH E POWELL
5008 AIRPORT RD
ROANOKE, VA 24012**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000,000
PREFER	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ROANOKE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5008 AIRPORT ROAD

CITY/ST/ZIP: ROANOKE, VA 24012-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JIMMIE L WADE
TITLE: PRESIDENT
ADDRESS: 5008 AIRPORT ROAD
CITY/ST/ZIP/CO: ROANOKE, VA 24012-

OFFICER

DIRECTOR

NAME: DARREN R JACKSON
TITLE: CEO
ADDRESS: 5008 AIRPORT ROAD
CITY/ST/ZIP/CO: ROANOKE, VA 24012-

OFFICER

DIRECTOR

NAME: KEVIN P FREELAND
TITLE: COO
ADDRESS: 5008 AIRPORT RD
CITY/ST/ZIP/CO: ROANOKE, VA 24012-

OFFICER

DIRECTOR

NAME: MICHAEL A NORONA
TITLE: CFO
ADDRESS: 5008 AIRPORT RD
CITY/ST/ZIP/CO: ROANOKE, VA 24012-

OFFICER

DIRECTOR

NAME: JOHN C BROUILLARD
TITLE: DIRECTOR
ADDRESS: 5008 AIRPORT ROAD
CITY/ST/ZIP/CO: ROANOKE, VA 24012-

OFFICER

DIRECTOR

NAME:	JOHN BERGSTROM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	WILLIAM S OGLESBY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	GILBERT T RAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	CARLOS A SALADRIGAS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	FRANCESCA M SPINELLI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	TAMARA A KOZIKOWSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CHIEF DEV OFFIC		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	JILL A LIVESAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP CONTROLLER		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	SARAH E POWELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	5008 AIRPORT ROAD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MICHAEL A NORONA	MICHAEL A NORONA, CFO	12/27/2010
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.