

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90069 030 ***158.75

DOCUMENT # P14940

1. Entity Name
GATES/ARROW DISTRIBUTING, INC.



Principal Place of Business
50 MARCUS DRIVE
MELVILLE, NY 11747

Mailing Address
50 MARCUS DR
MELVILLE, NY 11747 US



01102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-2860574

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPAS
BRODY, WAYNE
50 MARCUS DR
MELVILLE, NY 11747

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DSVP
BROWN, PETER S
50 MARCUS DR
ISLANDIA, NY 11749

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVCO
REILLY, PAUL J
50 MARCUS DR
MELVILLE, NY 11747

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
MICHAEL J. LONG
50 MARCUS DR
MELVILLE, NY 11747

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BIRNS, IRA M
50 MARCUS DR
MELVILLE, NY 11747

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
CASALE, MICHAEL M
50 MARCUS DR
MELVILLE, NY 11747

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

M. M. Casale V.P. Taxation 2/9/06 631-847-5319

Attachment
40019345
#P14940

GATES/ARROW DISTRIBUTING, INC.

EIN: 11-2860574

2006

DIRECTORS OF CORPORATION

Michael J. Long
Director

Peter S. Brown
Director

Paul J. Reilly
Director

BUSINESS ADDRESS

7459 South Lima Street
Englewood, CO 80112-3879

50 Marcus Drive
Melville, NY 11747

50 Marcus Drive
Melville, NY 11747