

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03998

FILED
Feb 04, 2010
Secretary of State

Entity Name: W. L. GORE & ASSOCIATES, INC.

Current Principal Place of Business:

555 PAPER MILL ROAD
NEWARK, DE 197117513

New Principal Place of Business:

Current Mailing Address:

PO BOX 9329
NEWARK, DE 19714 US

New Mailing Address:

FEI Number: 51-0083365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVITSKY, ROBERT J
% WL GORE & ASSOCIATES, INC
405 DOUGLAS AVE, SUITE 2705
ALTAMONTE SPRINGS, FL 32714 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: CD
Name: GORE, ROBERT W.
Address: 555 PAPER MILL ROAD
City-St-Zip: NEWARK, DE 19714

Title: S
Name: WILLIAMS, A. HOLLIDAY
Address: P.O. BOX 9329
City-St-Zip: NEWARK, DE 19714

Title: D
Name: ROBERTSON, CHARLES L.
Address: 110 TWADDELL MILL RD
City-St-Zip: WILMINGTON, DE 19807

Title: D
Name: CARROLL, CHARLES E
Address: 22 JOSH'S WAY
City-St-Zip: LANDENBERG, PA 19350

Title: D
Name: GIOVALE, VIRGINIA G.
Address: 361 EAST HORNY TOAD ROAD
City-St-Zip: FLAGSTAFF, AZ 86001

Title: PD
Name: KELLY, TERRI L
Address: 306 NORTH ASHVIEW LANE
City-St-Zip: GREENVILLE, DE 19807

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: A. HOLLIDAY WILLIAMS

SECR

02/04/2010

Electronic Signature of Signing Officer or Director

Date