

**ANNUAL REPORT
1995**



Division of Corporations
Secretary of State

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P14940

(1)

1. Corporation Name

GATES/FA DISTRIBUTING, INC.

Principal Place of Business

**39 PELHAM RIDGE DR.
GREENVILLE SC 29615**

Mailing Address

**39 PELHAM DR
GREENVILLE SC SC 29615-5709**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/23/1987

3a. Date of Last Report

05/01/1994

4. FEI Number

11-2860574

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

25 Hub Drive

Suite, Apt. #, etc.

Attn: Tax Dept.

City & State

Melville, NY

City & State

23

Zip Country

24

25

29

11747

30

USA

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VP
NAME	TERRY REAVIS,
STREET ADDRESS	3925 WINTERS HILL DR.
CITY-ST-ZIP	ATLANTA GA 30380
TITLE	VP
NAME	THOMPSON, MIKE R
STREET ADDRESS	201 WEBBERLY DRIVE
CITY-ST-ZIP	SIMPSONVILLE SC 29681
TITLE	VP
NAME	LUMPKIN, JERRY A
STREET ADDRESS	10 BRUSHYCREEK RIDGE
CITY-ST-ZIP	TAYLORS SC 29687
TITLE	VP
NAME	NICHOLSON, LEE
STREET ADDRESS	39 PELHAMRIDGE DRIVE
CITY-ST-ZIP	GREENVILLE SC 29615
TITLE	D
NAME	OXENHORN, ELI
STREET ADDRESS	55 BRYANT AVE
CITY-ST-ZIP	ROSLYN NY 11576
TITLE	D
NAME	GATES, DENNIS
STREET ADDRESS	5221 CENTRAL AVE.
CITY-ST-ZIP	RICHMOND CA 92804

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CD	☐ Change ☒ Addition
1.2 NAME	Stephen P. Kaufman	
1.3 STREET ADDRESS	25 Hub Drive	
1.4 CITY-ST-ZIP	Melville, NY 11747	
2.1 TITLE	VTSD	☐ Change ☒ Addition
2.2 NAME	Robert E. Klatell	
2.3 STREET ADDRESS	25 Hub Drive	
2.4 CITY-ST-ZIP	Melville, NY 11747	
3.1 TITLE	V	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	39 Pelham Ridge Drive	
3.4 CITY-ST-ZIP	Greenville, SC 29615	
4.1 TITLE	V	☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	39 Pelham Ridge Drive	
4.4 CITY-ST-ZIP		
5.1 TITLE	P	☐ Change ☒ Addition
5.2 NAME	Philip Ellet	
5.3 STREET ADDRESS	39 Pelham Ridge Drive	
5.4 CITY-ST-ZIP	Greenville, SC 29615	
6.1 TITLE	V	☐ Change ☒ Addition
6.2 NAME	Vincent J. Ferri	
6.3 STREET ADDRESS	25 Hub Drive	
6.4 CITY-ST-ZIP	Melville, NY 11747	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, as an attachment with an address.

SIGNATURE:

Vincent J. Ferri

Vincent J. Ferri, Vice President

(516) 391-1444