

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V64385

FILED
Jul 07, 2008
Secretary of State

Entity Name: DISTRIBUTION SERVICES OF AMERICA, INC.

Current Principal Place of Business:

2900 WESTCHESTER AVENUE
PURCHASE, NY 10577 US

New Principal Place of Business:

Current Mailing Address:

2900 WESTCHESTER AVENUE
PURCHASE, NY 10577 US

New Mailing Address:

FEI Number: 59-3147292 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLUMBERG EXCELSIOR CORPORATE SERVICES, INC
4435 OLD WINTER GARDEN RD.
ORLANDO, FL 32811 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FANELLI, ROBERT C
Address: 150 FOREST AVE
City-St-Zip: NEW ROCHELLE, NY 10804

Title: VPS () Delete
Name: FANELLI, MARY GAIL
Address: 150 FOREST AVE
City-St-Zip: NEW ROCHELLE, NY 10804

Title: VP () Delete
Name: FANELLI, BRIAN
Address: 2900 WESTCHESTER AVENUE
City-St-Zip: PURCHASE, NY 10577

Title: VP () Delete
Name: NELSON, LAURA
Address: 2900 WESTCHESTER AVENUE
City-St-Zip: PURCHASE, NY 10577

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FANELLI, ROBERT C
Address: 2900 WESTCHESTER AVE
City-St-Zip: PURCHASE, NY 10577

Title: VPS (X) Change () Addition
Name: FANELLI, MARY GAIL
Address: 2900 WESTCHESTER AVE.
City-St-Zip: PURCHASE, NY 10577

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRIAN D. FANELLI

VP

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date