


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 08:00 AM
Secretary of State

DOCUMENT # F02000001003 1. Entity Name ECR DISTRIBUTION, INC.	
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Principal Place of Business 2201 DWYER AVE UTICA, NY 13501	Mailing Address 2201 DWYER AVE UTICA, NY 13501
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DO NOT WRITE IN THIS SPACE



03022007 No Chg-P CR2E034 (11/05)

4. FEI Number 16-1490637	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	P REED, TIMOTHY R 2201 DWYER AVENUE UTICA, NY 13504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WUEST, MARY 2201 DWYER AVE UTICA, NY 13501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS TOTARO, PAUL 2201 DWYER AVENUE UTICA, NY 13504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HEAD, NOREEN 85 MIDDLE ROAD DUNKIRK, NY 14048
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/22/07-80010-021 150.00

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: Mary Wuest, Treasurer MARY WUEST 3/2/07 315-731-4103
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #