

1.) CORPORATION NAME:

**W. L. GORE & ASSOCIATES, INC.**

DUE DATE: **8/31/2011**

SCC ID NO: **F1149113**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000
PREFER	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 555 PAPER MILL ROAD

CITY/ST/ZIP: NEWARK, DE 19714-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: TERRI KELLY  
TITLE: P/CEO  
ADDRESS: 306 NORTH ASHVIEW LANE  
CITY/ST/ZIP/CO: GREENVILLE, DE 19807-

OFFICER

DIRECTOR

NAME: LEARIS DONOVAN  
TITLE: ASST. SEC.  
ADDRESS: 555 PAPER MILL RD.  
CITY/ST/ZIP/CO: NEWARK, DE 19711-

OFFICER

DIRECTOR

NAME: A HOLLIDAY WILLIAMS  
TITLE: S/T  
ADDRESS: 555 PAPER MILL RD.  
CITY/ST/ZIP/CO: NEWARK, DE 19714-

OFFICER

DIRECTOR

NAME: PRISCILLE O DOLOR  
TITLE: ASST SECRETARY  
ADDRESS: PO BOX 9329  
CITY/ST/ZIP/CO: NEWARK, DE 19714-

OFFICER

DIRECTOR

NAME: DAVID W GORE  
TITLE: DIRECTOR  
ADDRESS: 1233 NORTHWEST LEWISBURG AVE  
CITY/ST/ZIP/CO: CORVALLIS, OR 97330-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ A HOLLIDAY WILLIAMS</u>	<u>A HOLLIDAY WILLIAMS, S/T</u>	<u>8/3/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.