

1.) CORPORATION NAME:

CENTURY DISTRIBUTION SYSTEMS, INCORPORATED

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MARK T GORMAN
8730 STONY POINT PKWY STE 320
RICHMOND, VA**

SCC ID NO: **F1708454**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NJ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8730 STONY POINT PARKWAY
SUITE 320

CITY/ST/ZIP: RICHMOND, VA 23235

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:	MARK T GORMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CENTURY DIV		
ADDRESS:	CENTURY DISTRIBUTION SYSTEMS 8730 STONY POINT PKWY STE 320 RICHMOND, VA 23235		
CITY/ST/ZIP/CO:			
NAME:	YUTAKA NAKAGAWA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	8730 STONY POINT PARKWAY SUITE 320 RICHMOND, VA 23235		
CITY/ST/ZIP/CO:			
NAME:	JAMES J MCCULLEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP-CENTURY DIVI		
ADDRESS:	8730 STONY POINT PKWY STE 320 RICHMOND, VA 23235		
CITY/ST/ZIP/CO:			
NAME:	TIMOTHY T. CRAIG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP-DOMESTIC-EXP		
ADDRESS:	8730 STONY POINT PARKWAY SUITE 320 RICHMOND, VA 23235		
CITY/ST/ZIP/CO:			
NAME:	WILLIAM J MCGOUGH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP SALES		
ADDRESS:	8730 STONY POINT PARKWAY SUITE 320 RICHMOND, VA 23235		
CITY/ST/ZIP/CO:			

NAME:	RICHARD A. FERGUSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	CENTURY DISTRIBUTION SYSTEMS, INC		
CITY/ST/ZIP/CO:	2850 EAST DEL AMO BLVD CARSON, CA 90810		

NAME:	JOANNE AITCHISON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	DIRCT-ADMINISTR		
ADDRESS:	8730 Stony Point Parkway Suite 320		
CITY/ST/ZIP/CO:	Richmond, VA 23235		

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.

/s/ JOANNE AITCHISON	JOANNE AITCHISON, DIRCT-ADMINISTR	5/16/2014
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.