

**CORPORATION
ANNUAL REPORT
1995**

Florida Department of State
David E. Nathan
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY 26 AM 10:30

DOCUMENT # P06108

(5)

1. Corporation Name

SUPER SAVER WAREHOUSE CLUB, INC.

Principal Place of Business

DEPT 8013
702 SW 8TH ST
BENTONVILLE AR 72716-8013
US

Mailing Address

DEPT 8013
TAX DEPARTMENT
BENTONVILLE AR 72716-8013
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/20/1985

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

72-0992129

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

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

Zip

Country

Zip

Country

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 firm if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

AS

NAME

MELTON, SCOTT

STREET ADDRESS

11 STONE BRIDGE WAY

CITY - ST - ZIP

BENTONVILLE AR

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

D

NAME

BANKS, DAVID R.

STREET ADDRESS

873 S FAIR OAKS AVE

CITY - ST - ZIP

PASADENA CA

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

Y

NAME

BERTSCHY

STREET ADDRESS

1108 SE 10TH ST

CITY - ST - ZIP

BENTONVILLE AR

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

VD

NAME

SODERQUIST, DONALD G.

STREET ADDRESS

702 S.W. 8TH STREET

CITY - ST - ZIP

BENTONVILLE AR

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

PD

NAME

GLASS, DAVID D.

STREET ADDRESS

702 S.W. 8TH STREET

CITY - ST - ZIP

BENTONVILLE AR

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

S

NAME

RHOADS, ROBERT K.

STREET ADDRESS

702 S.W. 8TH ST.

CITY - ST - ZIP

BENTONVILLE AR

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(1)(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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James A. Walker Jr

James A. Walker Jr 5/15/95

501-277-1148

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Title

Telephone Number