

**2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 815881

**Entity Name:** 7-ELEVEN, INC.

**Current Principal Place of Business:**

3200 HACKBERRY ROAD  
ATTN: CORP. INCOME TAX DEPT  
IRVING, TX 75063

**Current Mailing Address:**

3200 HACKBERRY ROAD  
ATTN: CORP. INCOME TAX DEPT  
IRVING, TX 75063 US

**FEI Number:** 75-1085131

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD #221E  
PALM BEACH GARDENS, FL 33410 US

*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

**Officer/Director Detail :**

Title PCEO, DIRECTOR  
Name DEPINTO, JOSEPH M  
Address 3200 HACKBERRY ROAD  
City-State-Zip: IRVING TX 75063

Title AS, FRANCHISE SALES REP  
Name QURESHI, ASIF J  
Address 9351 CYPRESS LAKE DRIVE  
City-State-Zip: FORT MYERS FL 33919

Title SR VP, GC, SECRETARY  
Name GASAWAY, RANKIN L  
Address 3200 HACKBERRY ROAD  
City-State-Zip: IRVING TX 75063

Title AS, FRANCHISE SALES REP  
Name BYNES, MICHAEL  
Address 9351 CYPRESS LAKE DR  
City-State-Zip: FT. MYERS FL 33919

Title AS, FRANCHISE SALES REP  
Name GOLDSMITH, JOSEPH  
Address 9351 CYPRESS LAKE DR  
City-State-Zip: FT MYERS FL 33919

Title AS, FL ZONE VP  
Name LOVER, MICHAEL  
Address 800 TRAFALGAR COURT  
#360  
City-State-Zip: MAITLAND FL 32751

Title AS, FRANCHISE SALES REP  
Name STEVENS, WINSTON (DOUG)  
Address 800 TRAFALGAR COURT  
#360  
City-State-Zip: MAITLAND FL 32751

Title AS, FRANCHISE SALES REP  
Name REINA, KATHRYN  
Address 3200 HACKBERRY ROAD  
City-State-Zip: IRVING TX 75063

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** JULIE D. HARGROVE

**ASSISTANT SECRETARY** 10/10/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title AS, SR. DEVELOPMENT DIRECTOR  
Name DISTEL, GRANT  
Address 3200 HACKBERRY ROAD  
City-State-Zip: IRVING TX 75063

Title VP, DEVELOPMENT  
Name BRIDGES, JENNIFER  
Address 3200 HACKBERRY ROAD  
ATTN: CORP. INCOME TAX DEPT  
City-State-Zip: IRVING TX 75063

Title VP, FLORIDA ZONE MANAGER  
Name SUMMERS, JAMES  
Address 3200 HACKBERRY ROAD  
ATTN: CORP. INCOME TAX DEPT  
City-State-Zip: IRVING TX 75063

Title AS, SR. DIRECTOR-CORPORATE TAX  
Name HARGROVE, JULIE D  
Address 3200 HACKBERRY ROAD  
City-State-Zip: IRVING TX 75063

Title REAL ESTATE MANAGER  
Name BANTOS, CHARLES  
Address 3200 HACKBERRY ROAD  
ATTN: CORP. INCOME TAX DEPT  
City-State-Zip: IRVING TX 75063