

**2013 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 849374

**FILED  
Jul 01, 2013  
Secretary of State  
CC6872316408**

**Entity Name:** WAL-MART STORES, INC.

**Current Principal Place of Business:**

702 SW 8TH STREET  
BENTONVILLE, AR 72716

**Current Mailing Address:**

702 SW 8TH STREET  
BENTONVILLE, AR 72716 US

**FEI Number: 71-0415188**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 VP  
Name LEAK, COUNCILL  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title PRESIDENT, CEO, DIRECTOR  
Name DUKE, MICHAEL  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title SECRETARY  
Name GEARHART , JEFFREY  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR  
Name MAYER , MELISSA A.  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title TREASURER  
Name DAVIS, JEFF  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title ASSISTANT SECRETARY  
Name SMITH , ERRON  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title ASSISTANT SECRETARY  
Name LUCAS , ADELE  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name KINNARD , RICHARD  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

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*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: J. COUNCIL LEAK**

**VP**

**07/01/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name LETTS , SHANNON  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title SR. VP & CHIEF COMPLIANCE  
Name HARRIS, PHYLLIS  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title ASSISTANT SECRETARY  
Name LAZENBY, ANDREA  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title ASSISTANT SECRETARY  
Name POPE, JENNIFER L.  
Address 702 S.W. 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title ASSISTANT SECRETARY  
Name THRASHER, AMY  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716