

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000211

Entity Name: SAM'S WEST, 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:** 71-0794414**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 WADDELL, EMMA
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title VP & ASSISTANT TREASURER
Name ALLEN, MATTHEW
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title SENIOR VICE PRESIDENT & SECRETARY
Name ALLISON, GORDON Y.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name MCLAY, KATHRYN
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title SENIOR VICE PRESIDENT & ASSISTANT TREASURER
Name COOK, MICHAEL
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title ASST. SECRETARY
Name LITTLE, SARAH
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

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

Title PRESIDENT
Name MCLAY, KATHRYN
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: JESSICA RANCHER

VICE PRESIDENT

04/25/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASST. SECRETARY
Name	EDWARDS, GEOFFREY
Address	702 SW 8TH STREET
City-State-Zip:	BENTONVILLE AR 72716