## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002400

Entity Name: AVALARA, INC.

**Current Principal Place of Business:** 

255 SOUTH KING STREET

**SUITE 1800** 

SEATTLE, WA 98104

**Current Mailing Address:** 

255 SOUTH KING STREET **SUITE 1800** 

SEATTLE, WA 98104 US

FEI Number: 91-1995935 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:

Name

Electronic Signature of Registered Agent

Date

**FILED** Apr 25, 2018

**Secretary of State** 

CC7794040077

Officer/Director Detail:

Title PRESIDENT, CEO, DIRECTOR

MCFARLANE, SCOTT

Address 255 SOUTH KING STREET

**SUITE 1800** 

SEATTLE WA 98104 City-State-Zip:

Title **SECRETARY** 

PINNEY, ALESIA Name

255 SOUTH KING STREET Address

**SUITE 1800** 

SEATTLE WA 98104 City-State-Zip:

Title **DIRECTOR** 

FOOTE, MARION Name

255 SOUTH KING STREET Address

**SUITE 1800** 

City-State-Zip: SEATTLE WA 98104

Title **DIRECTOR** 

Name GOUX, BENJAMIN

Address 255 SOUTH KING STREET

**SUITE 1800** 

City-State-Zip: SEATTLE WA 98104 Title TREASURER, CFO

INGRAM, WILLIAM Name

Address 255 SOUTH KING STREET

**SUITE 1800** 

SEATTLE WA 98104 City-State-Zip:

Title DIRECTOR

RELLER, TAMI Name

Address

Address

255 SOUTH KING STREET

**SUITE 1800** 

SEATTLE WA 98104 City-State-Zip:

Title **DIRECTOR** 

GILHULY, EDWARD Name

255 SOUTH KING STREET

**SUITE 1800** 

City-State-Zip: SEATTLE WA 98104

Title **DIRECTOR** 

Name SADRIAN, JUSTIN

255 SOUTH KING STREET Address

**SUITE 1800** 

City-State-Zip: SEATTLE WA 98104

## 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: ALESIA PINNEY

Electronic Signature of Signing Officer/Director Detail

SECRETARY

04/25/2018

Date

## Officer/Director Detail Continued:

Address

TitleDIRECTORTitleDIRECTORNameSTONER, CHELSEANameVOGT, JARED

Address 255 SOUTH KING STREET Address 255 SOUTH KING STREET

SUITE 1800 SUITE 1800

City-State-Zip: SEATTLE WA 98104 City-State-Zip: SEATTLE WA 98104

Title DIRECTOR Title DIRECTOR

Name WATERMAN, GARY Name SINGH, RAJEEV

255 SOUTH KING STREET Address 255 SOUTH KING STREET

SUITE 1800 SUITE 1800

City-State-Zip: SEATTLE WA 98104 City-State-Zip: SEATTLE WA 98104