#### 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002400

Entity Name: AVALARA, INC.

**Current Principal Place of Business:** 

1100 2ND AVENUE SUITE 300

SEATTLE, WA 98101

# **Current Mailing Address:**

1100 2ND AVENUE SUITE 300 SEATTLE, WA 98101 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:

Address

Name

Electronic Signature of Registered Agent

Date

**FILED** Apr 01, 2016

Secretary of State

CC9007231990

#### Officer/Director Detail:

Title PRESIDENT, CEO, DIRECTOR MCFARLANE, SCOTT Name Address

1100 2ND AVENUE

SUITE 300

SEATTLE WA 98101 City-State-Zip:

Title **SECRETARY** PINNEY, ALESIA Name 1100 2ND AVENUE

SUITE 300

SEATTLE WA 98101 City-State-Zip:

Title **DIRECTOR** 

BURGUM, DOUG Name 1100 2ND AVENUE Address

SUITE 300

City-State-Zip: SEATTLE WA 98101

Title **DIRECTOR** 

1100 2ND AVENUE Address

SUITE 300

GILHULY, EDWARD A.

SEATTLE WA 98101 City-State-Zip:

Title TREASURER, CFO

Name INGRAM, BILL

Address

1100 2ND AVENUE SUITE 300

SEATTLE WA 98101 City-State-Zip:

Title **DIRECTOR** 

RELLER, TAMI Name

1100 2ND AVENUE Address

SUITE 300

SEATTLE WA 98101 City-State-Zip:

Title **DIRECTOR** 

Address

FOOTE, MARION R. Name

1100 2ND AVENUE

SUITE 300

City-State-Zip: SEATTLE WA 98101

Title **DIRECTOR** Name GOUX, BEN

1100 2ND AVENUE Address

SUITE 300

City-State-Zip: SEATTLE WA 98101

## 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: KEVIN RIEGELSBERGER

CHIEF OPERATING **OFFICER** 

04/01/2016

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name SADRIAN, JUSTIN Name STONER, CHELSEA
Address 1100 2ND AVENUE Address 1100 2ND AVENUE

SUITE 300 SUITE 300

City-State-Zip: SEATTLE WA 98101 City-State-Zip: SEATTLE WA 98101

Title DIRECTOR Title DIRECTOR

NameVOGT, JARED R.NameWATERMAN, GARYAddress1100 2ND AVENUEAddress1100 2ND AVENUE

SUITE 300 SUITE 300

City-State-Zip: SEATTLE WA 98101 City-State-Zip: SEATTLE WA 98101

Title COO
Name RIEGELSBERGER, KEVIN

SUITE 300

1100 2ND AVENUE

Address

City-State-Zip: SEATTLE WA 98101