

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 16 AM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600001493136

-05/18/95--01020--015

*****225.00 *****225.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 849374

(4)

1. Corporation Name

WAL-MART STORES, INC.

Principal Place of Business

DEPT 8013
TAX DEPARTMENT
BENTONVILLE AR 72716-8013
US

Mailing Address

DEPT 8013
BENTONVILLE AR 72716-8013
US

3. Date Incorporated or Qualified

06/08/1981

3a. Date of Last Report

05/01/1994

4. FBI Number

71-0415188

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when renouncing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	T
NAME	BERTSCHY TERRI L
STREET ADDRESS	1108 SE 10TH STREET
CITY - ST - ZIP	BENTONVILLE AR
TITLE	D
NAME	BANKS, DAVID R.
STREET ADDRESS	873 S FAIR OAKS AVE
CITY - ST - ZIP	PASADENA CA
TITLE	D
NAME	WALTON, JAMES L
STREET ADDRESS	702 S W 8TH STREET
CITY - ST - ZIP	BENTONVILLE, ARK 0
TITLE	D
NAME	SHEWMAKER, JACK
STREET ADDRESS	702 S W 8TH STREET
CITY - ST - ZIP	BENTONVILLE, ARK 0
TITLE	PD
NAME	GLASS, DAVID D.
STREET ADDRESS	702 S W 8TH STREET
CITY - ST - ZIP	BENTONVILLE, ARK 0
TITLE	S
NAME	RHOADS, ROBERT K.
STREET ADDRESS	702 S W 8TH STREET
CITY - ST - ZIP	BENTONVILLE, ARK 0

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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*****8.75 *****8.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James A. Walker Jr.

James A. Walker Jr. 5/15/95

501-277-1148

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature