# 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813203

Entity Name: WALGREEN CO.

### **Current Principal Place of Business:**

300 WILMOT ROAD DEERFIELD, IL 60015

### **Current Mailing Address:**

300 WILMOT ROAD DEERFIELD, IL 60015 US

### FEI Number: 36-1924025

# Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US FILED Apr 29, 2016 Secretary of State CC1431627372

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR	Title	PRESIDENT/DIRECTOR
Name	GOURLAY, ALEXANDER	Name	ASHWORTH, RICHARD
Address	108 WILMOT ROAD	Address	108 WILMOT ROAD
City-State-Zip:	DEERFIELD IL 60015	City-State-Zip:	DEERFIELD IL 60015
Title	DIRECTOR	Title	SECRETARY
Name	WAGNER, MARK A	Name	SMYSER, COLLIN
Address	300 WILMOT ROAD	Address	108 WILMOT ROAD
City-State-Zip:	DEERFIELD IL 60015	City-State-Zip:	DEERFIELD IL 60015
Title	PRESIDENT/CEO/DIRECTOR	Title	TREASURER/SVP/CFO
Title Name	PRESIDENT/CEO/DIRECTOR GOURLAY, ALEXANDER W	Title Name	TREASURER/SVP/CFO NIELSEN, ALAN
Name	GOURLAY, ALEXANDER W	Name	NIELSEN, ALAN
Name Address	GOURLAY, ALEXANDER W 108 WILMOT ROAD	Name Address	NIELSEN, ALAN 108 WILMOT ROAD
Name Address City-State-Zip:	GOURLAY, ALEXANDER W 108 WILMOT ROAD DEERFIELD IL 60015	Name Address City-State-Zip:	NIELSEN, ALAN 108 WILMOT ROAD DEERFIELD IL 60015
Name Address City-State-Zip: Title	GOURLAY, ALEXANDER W 108 WILMOT ROAD DEERFIELD IL 60015 SR VICE PRESIDENT	Name Address City-State-Zip: Title	NIELSEN, ALAN 108 WILMOT ROAD DEERFIELD IL 60015 ASST. SECRETARY
Name Address City-State-Zip: Title Name	GOURLAY, ALEXANDER W 108 WILMOT ROAD DEERFIELD IL 60015 SR VICE PRESIDENT DHAR, ABHI	Name Address City-State-Zip: Title Name	NIELSEN, ALAN 108 WILMOT ROAD DEERFIELD IL 60015 ASST. SECRETARY LEGUTKI, AMELIA

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: AMELIA LEGUTKI

ASST. SECRETARY

04/29/2016

Date

Electronic Signature of Signing Officer/Director Detail

Date