

**2015 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

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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            PRESIDENT  
Name            CHAWLA, SONA  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            PRESIDENT/DIRECTOR  
Name            ASHWORTH, RICHARD  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            DIRECTOR  
Name            WAGNER, MARK A  
Address        300 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            PRESIDENT  
Name            FILLER, LINDA  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            SVP/SECRETARY  
Name            REED, JAN S  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            PRESIDENT/CEO/DIRECTOR  
Name            GOURLAY, ALEXANDER W  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            TREASURER/SVP/CFO  
Name            NIELSEN, ALAN  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

Title            VICE PRESIDENT  
Name            DHAR, ABHI  
Address        108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015

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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:** MICHAEL FELISH

**ASST SECRETARY**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name FELISH, MICHAEL  
Address 108 WILMOT ROAD  
City-State-Zip: DEERFIELD IL 60015