

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849374

Entity Name: WAL-MART STORES, INC.

Current Principal Place of Business:

702 SW 8TH STREET
BENTONVILLE, AR 72716

Current Mailing Address:

702 SW 8TH STREET
BENTONVILLE, AR 72716 US

FEI Number: 71-0415188

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title CEO
Name MCMILLON, DOUG
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title VP
Name LEAK, J. COUNCILL
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title SECRETARY
Name GEARHART, JEFFREY
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title TREASURER
Name DAVIS, JEFFREY A
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name WOLF, LINDA S.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name CASH , JAMES I JR.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name ALVAREZ, AIDA M.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name BREYER, JAMES W.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

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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: J. COUNCILL LEAK

VP

04/18/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WALTON, JIM
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name PENNER, GREGORY B.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name DAFT, DOUGLAS N.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name MAYER, MELISSA A.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name SORENSON, ARNE M.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name WILLIAMS, CHRISTOPHER J.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name SCOTT, H. LEE JR.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name FLYNN, TIMOTHY P.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716

Title DIRECTOR
Name REINEMUND, STEVEN S.
Address 702 SW 8TH STREET
City-State-Zip: BENTONVILLE AR 72716