2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000002888

Entity Name: WALTON INTERNATIONAL GROUP(USA), INC.

FILED
Apr 20, 2017
Secretary of State
CC7943278180

Current Principal Place of Business:

4800 NORTH SCOTTSDALE ROAD, SUITE 4000

SCOTTSDALE, AZ 85251

Current Mailing Address:

4800 NORTH SCOTTSDALE ROAD, SUITE 4000 SCOTTSDALE, AZ 85251

FEI Number: 86-0751315 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR. SUITE A 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 CEO, DIRECTOR Title DIRECTOR, AUTHORIZED

Name DOHERTY, WILLIAM K SIGNATORY

Name KEISTER, MATTHEW M
Address 4800 NORTH SCOTTSDALE ROAD.

4800 NORTH SCOTTSDALE ROAD,
SHITE 4000 Address 4800 NORTH SCOTTSDALE ROAD,

SUITE 4000 Address 4800 NORTI

City-State-Zip: SCOTTSDALE AZ 85251

City-State-Zip: SCOTTSDALE AZ 85251

Title SECRETARY, AUTHORIZED SIGNATORY Title VP

SIGNATORT

Name SOUZA, WAYNE G Name FLEMING, ED

Address 4800 NORTH SCOTTSDALE ROAD, SUITE 4000 Address SUITE 4000 SUITE 4000

SCOTTSDALE AZ 85251 City-State-Zip: SCOTTSDALE AZ 85251

City-State-Zip: SCOTTSDALE AZ 85251 City-State-Zip: SCOTTSDALE AZ 8525

Title VP, AUTHORIZED SIGNATORY Title VP

Name HADLEY, ED Name VICK, JOHN

Address 4800 NORTH SCOTTSDALE ROAD, Address 4800 NORTH SCOTTSDALE ROAD,

SUITE 4000 SUITE 4000

City-State-Zip: SCOTTSDALE AZ 85251 City-State-Zip: SCOTTSDALE AZ 85251

Title EVP, AUTHORIZED SIGNATORY

Name WOODHEAD, TODD

Address 4800 NORTH SCOTTSDALE ROAD,

SUITE 4000

City-State-Zip: SCOTTSDALE AZ 85251

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: TODD WOODHEAD AUTHORIZED 04/20/2017 SIGNATORY

Electronic Signature of Signing Officer/Director Detail

Date