## **2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P38719

Entity Name: HD SUPPLY, INC.

**Current Principal Place of Business:** 

3400 CUMBERLAND BOULEVARD

ATLANTA GA 30339

**Current Mailing Address:** 

3400 CUMBERLAND BOULEVARD ATLANTA GA 30339 US

FEI Number: 75-2007383 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Jan 22, 2019

**Secretary of State** 

0553064085CC

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title SECRETARY

Name DEANGELO, JOSEPH J. Name MCDEVITT, DAN S.

Address 3400 CUMBERLAND BOULEVARD Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339 City-State-Zip: ATLANTA GA 30339

Title TREASURER Title VP

Name GONZALEZ, MARC Name LEVITT, EVAN J

Address 3400 CUMBERLAND BOULEVARD Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339 City-State-Zip: ATLANTA GA 30339

Title DIRECTOR Title DIRECTOR

Name ATKINS, BETSY S. Name PEFFER, CHARLES W.

Address 3400 CUMBERLAND BOULEVARD Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339 City-State-Zip: ATLANTA GA 30339

Title DIRECTOR Title DIRECTOR

Name RUBRIGHT, JAMES A. Name ALDEN, JOHN W.

Address 3400 CUMBERLAND BOULEVARD Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339 City-State-Zip: ATLANTA GA 30339

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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: DAN S. MCDEVITT SECRETARY 01/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name AFFELDT, KATHLEEN J.

Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339

Title DIRECTOR

Name LEAV, PETER A.

Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339

Title DIRECTOR

Name MCNAMEE, PATRICK R.

Address 3400 CUMBERLAND BOULEVARD

City-State-Zip: ATLANTA GA 30339