

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P38719

Entity Name: HD SUPPLY, INC.

**Current Principal Place of Business:**

3100 CUMBERLAND BOULEVARD  
SUITE 1700  
ATLANTA, GA 30339

**Current Mailing Address:**

3100 CUMBERLAND BOULEVARD  
SUITE 1700  
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

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            DEANGELO, JOSEPH J  
Address        3100 CUMBERLAND BOULEVARD  
City-State-Zip: ATLANTA GA 30339

Title            SECRETARY  
Name            MCDEVITT, DAN S  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title            TREASURER  
Name            GONZALEZ, MARC  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title            VP  
Name            LEVITT, EVAN J  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title            DIRECTOR  
Name            ATKINS, BETSY S  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title            DIRECTOR  
Name            PEFFER, CHARLES W  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title            DIRECTOR  
Name            RUBRIGHT, JAMES A  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title            DIRECTOR  
Name            ALDEN, JOHN W  
Address        3100 CUMBERLAND BOULEVARD  
SUITE 1700  
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

02/14/2018

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name AFFELDT, KATHLEEN J  
Address 3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title DIRECTOR  
Name MCNAMEE, PATRICK R  
Address 3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339

Title DIRECTOR  
Name LEAV, PETER A  
Address 3100 CUMBERLAND BOULEVARD  
SUITE 1700  
City-State-Zip: ATLANTA GA 30339