

849374

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Annual Report
Filed on 7-20-87

2 pgs.

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION
ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

AND
FILED

1987 JUL 23 AM 9 49

FLORIDA DEPARTMENT OF STATE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

849374
WAL-MART STORES, INC.
702 S W 8TH STREET
P.O. BOX 116
BENTONVILLE, ARKANSAS 72716

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office; P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida 06/08/1981

4. Federal Employer Identification Number (FEIN) 71-0415188

5. Date of Last Report 08/21/1986

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1986

1	2	3	4	5
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
1. WALTON, SAM M	D	702 S W 8TH STREET	BENTONVILLE, ARK	0
2. RATELIFF, CHARLES	T/V	702 S W 8TH STREET	BENTONVILLE, ARK	0
3. WALTON, JAMES L	D	702 S W 8TH STREET	BENTONVILLE, ARK	0
4. SHEWMAKER, JACK	V/D	702 S W 8TH STREET	BENTONVILLE, ARK	0
5. GLASS, DAVID D.	P/D	702 S W 8TH STREET	BENTONVILLE, ARK	0
6. RHODES, ROBERT K.	S	702 S W 8TH STREET	BENTONVILLE, ARK	0

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
8751 W. BROADWAY BLVD.
PLANTATION, FL. 33324

8. Name and Address of New Registered Agent

Name 81
Street Address 1 (Do NOT Use P.O. Box Number) 82
Street Address 2 (Do NOT Use P.O. Box Number) 83
City and State 84 FL. Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, qualified to transact business in the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on:

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3 Additional Fee required for Registered Agent changes

10. IMPORTANT - THIS SECTION MUST BE COMPLETED
Has this corporation amended its articles to reflect an increase in the authorized number of shares since the last annual report?
YES NO

11. IMPORTANT - THIS SECTION MUST BE COMPLETED IF ITEM 10 IS YES
Has said amendment been filed with this office? Yes No
If the answer is no, this report cannot be processed until this amendment has been filed.

12. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath (Officer signing must be listed in Block 6).

Signature *Charles Rateliff*
Typed Name of Signing Officer Charles Rateliff

Title Vice Pres./Treasurer

Date June 23, 1987
Telephone Number 501-273-4138

13. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee required for a Certificate of Status

CRECORN (1/86)