

**2013 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F01000001766

**Entity Name:** SAM'S EAST, 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:** 71-0794412

**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 PCEO  
Name HARBAUGH, PATRICK T  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title TREA  
Name DAVIS, JEFF  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name HARRIS, PHYLLIS  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title DIR  
Name COTTRELL, LORI  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title DIR  
Name THRASHER, AMY  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title DIR  
Name LAZENBY, ANDREA  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

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

Title VP  
Name LEAK, J. COUNCIL  
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. COUNCIL LEAK

**VICE PRESIDENT**

**03/26/2013**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SVP  
Name FULLER, ANTHONY L.  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name MULLER, CARL  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

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

Title VP  
Name GARDNER, MICHAEL E.  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name CROWE, CARL  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title SVP  
Name BRAY, J. ROBERT  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name KINNARD, RICHARD O.  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name CLARKE, CAROLINE  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title VP  
Name SAYLORS-LASTER, KIMBERLY K.  
Address 702 SW 8TH STREET  
City-State-Zip: BENTONVILLE AR 72716