



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No 150027		2. Exact name of the limited liability company WALKAWAY USA, LLC	
3. State of Formation Texas		4. Brief description of the character of the business which is actually conducted in Rhode Island Provide products and services to other organizations	
5. Principal office address 122 West Carpenter Freeway, 6th Floor		City Irving	State Texas
		Zip 75039	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Tina Morgan		Contact Title Operations Manager	
Street Address 122 West Carpenter Freeway, 6th Floor		City Irving	State Texas
		Zip 75039	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐			
Manager Name Jeff Beaver		Manager Name William Bigley	
Street Address 122 West Carpenter Freeway, 6th Floor		Street Address 122 West Carpenter Freeway, 6th Floor	
City Irving	State Texas	Zip 75039	City Irving
			State Texas
			Zip 75039
Manager Name John Pappanastos		Manager Name	
Street Address 122 West Carpenter Freeway, 6th Floor		Street Address	
City Irving	State Texas	Zip 75039	City
			State
			Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name National Registered Agents, Inc		Address 222 Jefferson Boulevard, Suite 200	
Address		City Warwick	Zip 02888

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

File Date	8-30-07
Check No.	00002922
By:	mnc
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.


Signature of Authorized Person
8/17/07
Date
JEFFREY W. BEAVER
Print or Type Name of Authorized Person