

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
Jun 20 1996 8:00 am  
Secretary of State

**DOCUMENT # P14754 (6)**

1. Corporation Name  
**COSTCO WHOLESALE CORPORATION**



Principal Place of Business: **10809 120 AVE NE  
P O BOX 97077  
KIRKLAND WA 98083-6777**

Mailing Address: **10809 120 AVE NE  
P O BOX 97077  
KIRKLAND WA 98083-6777**

3. Date Incorporated or Qualified: **06/08/1987**      3a. Date of Last Report: **04/11/1995**

4. FEI Number: **91-1223280**      Applied For:  Not Applicable

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **21 999 Lake Drive**  
Suite, Apt. #, etc: **22**

2a. Mailing Address: **26 999 Lake Drive**  
Suite, Apt. #, etc: **27 Attn: Licensing Dept.**

City & State: **23 Issaquah, WA**      City & State: **28 Issaquah, WA**

Zip: **24 98027**      Country: **25 US**      Zip: **29 98027**      Country: **30 US**

9. Name and Address of Current Registered Agent: **CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent: **81 Name**  
**82 Street Address (P.O. Box Number is Not Acceptable)**  
**83**  
**84 City**      **FL**      **85 Zip Code**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Print Name)      DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OLIN, RICHARD J	1.2 NAME	
STREET ADDRESS	10809 120TH AVE NE	1.3 STREET ADDRESS	SEE ATTACHED SCHEDULE A.
CITY - ST - ZIP	KIRKLAND WA	1.4 CITY - ST - ZIP	
TITLE	PCEO <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SINEGAL, JAMES D.	2.2 NAME	
STREET ADDRESS	10809 120 AVE NE	2.3 STREET ADDRESS	
CITY - ST - ZIP	KIRKLAND WA	2.4 CITY - ST - ZIP	
TITLE	VTCF <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALANTI, RICHARD A.	3.2 NAME	
STREET ADDRESS	10809 120 AVE NE	3.3 STREET ADDRESS	
CITY - ST - ZIP	KIRKLAND WA	3.4 CITY - ST - ZIP	
TITLE	VS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENOUEL, JOEL	4.2 NAME	
STREET ADDRESS	10809 120 AVE NE	4.3 STREET ADDRESS	
CITY - ST - ZIP	KIRKLAND WA	4.4 CITY - ST - ZIP	
TITLE	AS <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURDICK, DONALD E	5.2 NAME	
STREET ADDRESS	10809 120TH AVE NE	5.3 STREET ADDRESS	600001869616
CITY - ST - ZIP	KIRKLAND WA	5.4 CITY - ST - ZIP	-06/20/96--01054--004
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	***225.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHAW, RALPH R.	6.2 NAME	
STREET ADDRESS	111 SW 5TH AVE.	6.3 STREET ADDRESS	
CITY - ST - ZIP	PORTLAND OR	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ (Print Name)      DATE: \_\_\_\_\_

CR2E034 (3/96)

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Schedule A  
**Costco Wholesale Corporation**  
**Principal Officers and Directors**

**Principal Officers**

<u>Name</u>	<u>Address and Phone</u>	<u>Title</u>
James D. Sinegal	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	President
Joel Benoliel	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	V.President/Secretary
Harold E. Kaplan	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	Treasurer
Richard J. Olin	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	Assistant Secretary

**Directors**

<u>Name</u>	<u>Address and Phone</u>	<u>Title</u>
James D. Sinegal	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	Director
Jeffrey Brotman	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	Director
Ralph R. Shaw	400 S.W. Sixth Avenue Suite 1100 Portland, OR 97104 (206) 313-8100	Director
Frederick O. Paulsell, Jr.	1201 Third Avenue Suite 1201 Seattle, WA 98101 (206) 313-8100	Director
David Pulver	16 Cobblefield Drive Mendham, NJ 07945 (206) 313-8100	Director
Richard D. DiCerchio	999 Lake Drive Issaquah, WA 98027 (206) 313-8100	Director

**Sole Shareholder**  
Price/Costco, Inc.  
999 Lake Drive  
Issaquah, WA 98027  
% stock owned - 100%