

**2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Feb 19, 2010  
Secretary of State**

DOCUMENT# P14754

Entity Name: COSTCO WHOLESALE CORPORATION

**Current Principal Place of Business:**

999 LAKE DRIVE  
ISSAQUAH, WA 98027

**New Principal Place of Business:**

**Current Mailing Address:**

999 LAKE DRIVE  
ATTN: LICENSING DEPT.  
ISSAQUAH, WA 98027

**New Mailing Address:**

FEI Number: 91-1223280      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VPAS  
Name: OLIN, RICHARD J  
Address: 999 LAKE DR  
City-St-Zip: ISSAQUAH, WA 98027 US

Title: PD  
Name: JELINEK, WALTER C  
Address: 999 LAKE DR  
City-St-Zip: ISSAQUAH, WA 98027 US

Title: SVPS  
Name: BENOLIEL, JOEL  
Address: 999 LAKE DR  
City-St-Zip: ISSAQUAH, WA 98027 US

Title: EVC  
Name: GALANTI, RICHARD A CFO  
Address: 999 LAKE DRIVE  
City-St-Zip: ISSAQUAH, WA 98027

Title: SVP  
Name: BURNETT, CHARLES V  
Address: 999 LAKE DRIVE  
City-St-Zip: ISSAQUAH, WA 98027

Title: SVP  
Name: PETTERSON, DAVID S  
Address: 999 LAKE DRIVE  
City-St-Zip: ISSAQUAH, WA 98027

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: GAIL E. TSUBOI

AS

02/19/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date