

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000796

**Entity Name:** NINTENDO OF AMERICA INC.

**Current Principal Place of Business:**

4600 150TH AVENUE NE  
REDMOND, WA 98052

**Current Mailing Address:**

4600 150TH AVENUE NE  
REDMOND, WA 98052

**FEI Number:** 13-3024042

**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 CEO, DIRECTOR  
Name IWATA, SATORU  
Address 4600 150TH AVE NE  
City-State-Zip: REDMOND WA 98052

Title DIRECTOR  
Name KIMISHIMA, TATSUMI  
Address 4600 150TH AVE NE  
City-State-Zip: REDMOND WA 98052

Title PRESIDENT, COO  
Name FILS-AIME, REGINALD  
Address 4600 150TH AVE NE  
City-State-Zip: REDMOND WA 98052

Title TREASURER  
Name PETURSSON, INGVAR  
Address 4600 150TH AVE NE  
City-State-Zip: REDMOND WA 98052

Title VP  
Name JAMES, DON  
Address 4600 150TH AVE NE  
City-State-Zip: REDMOND WA 98052

Title SECRETARY  
Name PRITCHARD, DEVON  
Address 4600 150TH AVE NE  
City-State-Zip: REDMOND WA 98052

Title VP  
Name FUKUDA, MIKE  
Address 4600 150TH AVENUE NE  
City-State-Zip: REDMOND WA 98052

Title VP  
Name MOFFITT, SCOTT  
Address 4600 150TH AVENUE NE  
City-State-Zip: REDMOND WA 98052

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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:** INGVAR PETURSSON

**TREASURER**

**04/21/2015**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            LINCOLN, HOWARD  
Address        4600 150TH AVENUE NE  
City-State-Zip: REDMOND WA 98052