## **2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000002899

**Entity Name: COSTCO WHOLESALE CORPORATION** 

**Current Principal Place of Business:** 

999 LAKE DR

ISSAQUAH. WA 98027

**Current Mailing Address:** 

PO BOX 35005

SEATTLE, WA 98124-3405 US

FEI Number: 91-1223280 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

FILED Jan 27, 2021

**Secretary of State** 

3756842273CC

Officer/Director Detail:

Title CD Title

Name JAMES, HAMILTON Name JELINEK, WALTER C

Address 345 PARK AVE Address 999 LAKE DR

City-State-Zip: NEW YORK NY 10154 City-State-Zip: ISSAQUAH WA 98027

Title PCEOD Title SVP

Name JELINEK, WALTER Name GALANTI, RICHARD A

Address 999 LAKE DR Address 999 LAKE DR

City-State-Zip: ISSAQUAH WA 98027 City-State-Zip: ISSAQUAH WA 98027

Title EVPCFOD Title SSVP

NameGALANTI, RICHARDNameSULLIVAN, JOHNAddress999 LAKE DRAddress999 LAKE DR

City-State-Zip: ISSAQUAH WA 98027 City-State-Zip: ISSAQUAH WA 98027

Title TVP Title SVPAS

Name ELLIOTT, JEFFREY Name CALLANS, PATRICK

Address 999 LAKE DR Address 999 LAKE DR

City-State-Zip: ISSAQUAH WA 98027 City-State-Zip: ISSAQUAH WA 98027

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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: GAIL E. TSUBOI AVP/ASST. SECRETARY 01/27/2021

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title AVPAS

Name MCCULLA, MARGARET
Address 45940 HORSESHOE DR

SUITE 150

City-State-Zip: STERLING VA 20166

Title D

Name DECKER, SUSAN Address 999 LAKE DR

City-State-Zip: ISSAQUAH WA 98027

Title D

Name JEWELL, SARAH M.R. Address 999 LAKE DRIVE

City-State-Zip: ISSAQUAH WA 98027

Title D

Name RAIKES, JEFFREY

Address 2157 N NORTHLAKE WAY

SUITE 220

City-State-Zip: SEATTLE WA 98103

Title D

Name WILDEROTTER, MAGGIE

Address 19890 SHENANDOAH SCHOOL RD

City-State-Zip: PLYMOUTH CA 95669

Title AVPAS

Name TSUBOI, GAIL
Address 999 LAKE DR

City-State-Zip: ISSAQUAH WA 98027

Title [

Name DENMAN, KENNETH

Address 50 CHERRY HILLS FARM DR City-State-Zip: ENGLEWOOD CO 80113

Title D

Name MUNGER, CHARLES Address 355 SO. GRAND AVE

34TH FLOOR

City-State-Zip: LOS ANGELES CA 90071

Title D

Name STANTON, JOHN Address 155 108TH AVE NE

STE 400

City-State-Zip: BELLEVUE WA 98004