

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06786

**Entity Name:** NIKE RETAIL SERVICES, INC.

**Current Principal Place of Business:**

ONE BOWERMAN DRIVE  
BEAVERTON, OR 97005-6453

**Current Mailing Address:**

ONE BOWERMAN DRIVE  
BEAVERTON, OR 97005-6453 US

**FEI Number:** 93-0891124

**Certificate of Status Desired:** No

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

UNITED AGENT GROUP INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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           TREASURER  
Name           TRUSSELL, PAUL  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           ASSISTANT SECRETARY / DIRECTOR  
Name           WHITTENBURG, EMILY  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           VP  
Name           FOWLER, MARGO  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           SECRETARY / DIRECTOR  
Name           HUNTER, MARY  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           ASSISTANT SECRETARY  
Name           WILSON-CHIRU, CARLOS  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           DIRECTOR / VICE PRESIDENT  
Name           NIELSEN, JOHANNA  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           CFO  
Name           KENZIE, DANIEL WILLIAM MC  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title           PRESIDENT & CHIEF EXECUTIVE  
                  OFFICER  
Name           UZZELL, G. SCOTT  
Address        ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

**Continues on page 2**

*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:** MARY HUNTER

**SECRETARY, BY JON-  
MICHAEL SANCHEZ  
ATTORNEY-IN-FACT**

**04/25/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASSISTANT SECRETARY  
Name BALDWIN, KELSEY  
Address ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title ASSISTANT SECRETARY  
Name KINNEY, AMANDA  
Address ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title ASSISTANT SECRETARY  
Name MITCHELL, DON  
Address ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453

Title ASSISTANT SECRETARY  
Name MOCERI, NATE  
Address ONE BOWERMAN DRIVE  
City-State-Zip: BEAVERTON OR 97005-6453