2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005152

Entity Name: OAKLEY INC. A WA CORPORATION

FILED Apr 10, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1 ICON

FOOTHILL RANCH, CA 92610

Current Mailing Address: New Mailing Address:

1 ICON PO BOX 8509

TAX DEPARTMENT
FOOTHILL RANCH, CA 92610 30
TAX DEPARTMENT
MASON, OH 45040 US

FEI Number: 95-3194947 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC. 515 E. PARK AVENUE

TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CEOP

Name: BADEN, COLIN

Address: 1 ICON

City-St-Zip: FOOTHILL RANCH, CA 92610

Title: CFOD

Name: SHIELDS, RICHARD

Address: 1 ICON

City-St-Zip: FOOTHILL RANCH, CA 92610

Title: VP

Name: GORDON, DONNA

Address: 1 ICON

City-St-Zip: FOOTHILL RANCH, CA 92610

Title: VPSD

Name: BOXER, MICHAEL A
Address: 44 HARBOR PARK DRIVE
City-St-Zip: PORT WASHINGTON, NY 11050

Title: VPT

 Name:
 GIANNOLA, VITO

 Address:
 44 HARBOR PARK DRIVE

 City-St-Zip:
 PORT WASHINGTON, NY 11050

Title: CAO

Name: SAMPSON, BRIAN

Address: 1 ICON

City-St-Zip: FOOTHILL RANCH, CA 92610

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: COLIN BADEN CEOP 04/10/2012