

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90350 005 ***150.00

DOCUMENT # F97000005025

1. Entity Name

ADIDAS PROMOTIONAL RETAIL OPERATIONS, INC.

Principal Place of Business

**9605 SW NIMBUS AVE.
 BEAVERTON OR 97008**

Mailing Address

**5675 N BLACKSTOCK ROAD
 SPARTANBURG SC 29303
 US**

2. Principal Place of Business

5055 N. Greeley Av.

3. Mailing Address

5055 N. Greeley Av.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE



City & State

Portland, OR

City & State

Portland, OR

4. FEI Number

93-1114590

Applied For

Not Applicable

Zip

97217

Country

USA

Zip

97217

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
 NAME **CS**
 STREET ADDRESS **CUNIFF, JOHN**
 CITY-ST-ZIP **9605 SW NIMBUS AVE.
 BEAVERTON OR 97008**

TITLE ☒ Change ☐ Addition
 NAME **C/P/D**
 STREET ADDRESS **Ross McMullin**
 CITY-ST-ZIP **5055 N. Greeley Av.
 Portland, OR 97217**

TITLE ☐ Delete
 NAME **CFO**
 STREET ADDRESS **SCHMIDTMANN, BRANDT**
 CITY-ST-ZIP **9605 SW NIMBUS AVE.
 BEAVERTON OR 97008**

TITLE ☒ Change * ☐ Addition
 NAME **5055 N. Greeley Av.**
 STREET ADDRESS **Portland, OR 97217**

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **EHRlich, PAUL**
 CITY-ST-ZIP **9605 SW NIMBUS AVE.
 BEAVERTON OR 97008**

TITLE ☒ Change * ☐ Addition
 NAME **5055 N. Greeley Av.**
 STREET ADDRESS **Portland, OR 97217**

TITLE ☒ Delete
 NAME **T**
 STREET ADDRESS **MADSON, DAVID**
 CITY-ST-ZIP **5675 N BLACKSTOCK ROAD
 SPARTANBURG SC 29303**

TITLE ☐ Change ☐ Addition
 NAME **5055 N. Greeley Av.**
 STREET ADDRESS **Portland, OR 97217**

TITLE ☐ Delete
 NAME **TO**
 STREET ADDRESS **CARVELL, CHUCK**
 CITY-ST-ZIP **9605 SW NIMBUS AVENUE
 BEAVERTON OR 97008**

TITLE ☒ Change * ☐ Addition
 NAME **5055 N. Greeley Av.**
 STREET ADDRESS **Portland, OR 97217**

TITLE ☐ Delete
 NAME **5055 N. Greeley Av.**
 STREET ADDRESS **Portland, OR 97217**

TITLE ☐ Change ☐ Addition
 NAME ***The changes reflected by an * are
 for the addresses only.**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 EHRlich, Secretary

02/27/02

(917) 234-2394

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0621965 AT

CR2E034 (9/01)