

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06786

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: NIKE RETAIL SERVICES, INC.

## Current Principal Place of Business:

JOHN F. COBURN III  
ONE BOWERMAN DRIVE  
BEAVERTON, OR 970056453

## Current Mailing Address:

JOHN F. COBURN III  
ONE BOWERMAN DRIVE  
BEAVERTON, OR 970056453

## New Principal Place of Business:

JOHN F. COBURN III  
ONE BOWERMAN DRIVE DF4  
BEAVERTON, OR 970056453

## New Mailing Address:

JOHN F. COBURN III  
ONE BOWERMAN DRIVE DF4  
BEAVERTON, OR 970056453

FEI Number: 93-0891124

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCEO ( ) Delete  
Name: PARKER, MARK G  
Address: ONE BOWERMAN DRIVE  
City-St-Zip: BEAVERTON, OR 970056453

Title: VPD ( ) Delete  
Name: STEWART, LINDSAY D  
Address: ONE BOWERMAN DR  
City-St-Zip: BEAVERTON, OR 970056453

Title: CFOD ( ) Delete  
Name: BLAIR, DONALD W  
Address: ONE BOWERMAN DR  
City-St-Zip: BEAVERTON, OR 970056453

Title: T ( ) Delete  
Name: WOODRUFF, ROBERT W  
Address: ONE BOWERMAN DRIVE  
City-St-Zip: BEAVERTON, OR 970056453

Title: S ( ) Delete  
Name: COBURN, JOHN F III  
Address: ONE BOWERMAN DRIVE  
City-St-Zip: BEAVERTON, OR 970056453

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: CARTER, JAMES C  
Address: ONE BOWERMAN DR  
City-St-Zip: BEAVERTON, OR 970056453

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN F. COBURN III

S

01/20/2009

Electronic Signature of Signing Officer or Director

Date