

Filed
Secretary of State
State of Washington
Date Filed: 06/27/2024
Effective Date: 06/27/2024
UBI #: 602 745 426

Annual Report

BUSINESS INFORMATION

Business Name:

EQR-FANWELL 2007 GP, LLC

UBI Number: **602 745 426**

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

Business Status: **ACTIVE**

Principal Office Street Address:

TWO NORTH RIVERSIDE PLAZA, SUITE 400, CHICAGO, IL, 60606, UNITED STATES

Principal Office Mailing Address:

TWO NORTH RIVERSIDE PLAZA, SUITE 400, CHICAGO, IL, 60606

Expiration Date: **07/31/2025**

Jurisdiction:

UNITED STATES, DELAWARE

Formation/Registration Date:

07/18/2007

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

REAL ESTATE, REAL ESTATE

REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address Mailing Address

CT CORPORATION 505 UNION AVE SE STE 120, OLYMPIA, WA, 98501- 505 UNION AVE SE STE 120, OLYMPIA, WA, 98501-

SYSTEM 1474, UNITED STATES 1474, UNITED STATES

PRINCIPAL OFFICE

Phone:

Email:

CLS-CTARMSEVIDENCE@WOLTERSKLUWER.COM

Street Address:

TWO NORTH RIVERSIDE PLAZA, SUITE 400, CHICAGO, IL, 60606, USA

Mailing Address:

TWO NORTH RIVERSIDE PLAZA, SUITE 400, CHICAGO, IL, 60606, USA

GOVERNORS		, , , , , , , , , , , , , , , , , , , ,	,		
Title	Туре	Entity Name	_	First Name	Last Name
GOVERNOR	ENTITY	ERP OPERATING LIMITED PARTN	NERSHIP		
NATURE OF BU	SINESS				
REAL ES'REAL ES'					
EFFECTIVE DAT	ГЕ				
Effective Date: 06/27/2024					
CONTROLLING	INTEREST				
- No 2. In the past 12 r - No a. If "Yes", in financial interest ir - No 3. If you answered - No You must submit a	the past 36 mon the entity? I "Yes" to question Controlling Inter	real property in Washington, such as land be been a transfer of at least 16-2/3 percent ths, has there been a transfer of controlling on 2a, has a controlling interest transfer retrest Transfer Return form if you answere est Transfer is subject to penalty provision Interest, visit www.dor.wa.gov/REET	t of the ownership, stock, or of any interest (50 percent or great eturn been filed with the Departed "yes" to questions 1 and 2a ons of RCW 82.45.220.	ther financial interecter) of the ownershi	est in the entity? p, stock, or other
RETURN ADDRE	ESS FOR THIS	FILING		_	
Attention: Email: Address:					
UPLOAD ADDIT	IONAL DOCUM	ENTS			
Do you have addit	ional documents	to upload? - No			
EMAIL OPT-IN					
By checking the I will no longer reco		opt into receiving all notifications from t cations.	he Secretary of State for this e	entity via email only	y. I acknowledge that
AUTHORIZED P	ERSON				
I am an author	rized person.				
Person Type: INDIVIDUAL					

First Name
KELLY

Last Name: LETTMANN

Title:

POWER OF ATTORNEY

This document is hereby executed under penalty of law and is to the best of my knowledge, true and correct.