

## Annual Report

### BUSINESS INFORMATION

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Business Name:

**SNOHOMISH PORTFOLIO LLLP**

UBI Number:

**604 063 135**

Business Type:

**WA LIMITED LIABILITY LIMITED PARTNERSHIP**

Business Status:

**ACTIVE**

Principal Office Street Address:

**1118 5TH AVE AVE, SEATTLE, WA, 98101, USA**

Principal Office Mailing Address:

**1118 5TH AVE AVE, SEATTLE, WA, 98101, USA**

Expiration Date:

**12/31/2018**

Jurisdiction:

**UNITED STATES, WASHINGTON**

Formation/Registration Date:

**12/02/2016**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**REGISTERED AGENT** [RCW 23.95.410](#)

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Registered Agent Name	Street Address	Mailing Address
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF SEATTLE KING COUNTY	1118 5TH AVE, SEATTLE, WA, 98101-3001, UNITED STATES	

### PRINCIPAL OFFICE

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Phone:

**206-490-4343**

Email:

**PLURF@YWCAWORKS.ORG**

Street Address:

**1118 5TH AVE AVE, SEATTLE, WA, 98101, USA**

Mailing Address:

**1118 5TH AVE AVE, SEATTLE, WA, 98101, USA**

## GOVERNORS

Title	Type	Entity Name	First Name	Last Name	Address
GOVERNOR	INDIVIDUAL		LLC	SNOHOMISH PORTFOLIO DASH NGP	
GOVERNOR	INDIVIDUAL		LLC	SNOHOMISH PORTFOLIO DASH NGP	

## NATURE OF BUSINESS

HEALTH CARE, SOCIAL ASSISTANCE & SERVICE ORGANIZATION

## EFFECTIVE DATE

Effective Date:

**12/29/2017**

## CONTROLLING INTEREST

Does your company own real property (including leasehold interests) in Washington?

**NO**

## RETURN ADDRESS FOR THIS FILING

Attention:

**PAULA LURF**

Email:

Address:

**1118 5TH AVE, 1118 5TH AVE, SEATTLE, WA, 98101-3001, USA**

## UPLOAD ADDITIONAL DOCUMENTS

Do you have additional documents to upload? **No**

## AUTHORIZED PERSON

☒ I am an authorized person.

Person Type:

**ENTITY**

First Name:

**PAULA**

Last Name:

**LURF**

Entity Name:

**YWCA OF SEATTLE**

Title:

**CONTROLLER**

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