

Filed Secretary of State State of Washington Date Filed: 08/03/2022 Effective Date: 08/03/2022 UBI #: 602 643 261

# **Annual Report**

#### **BUSINESS INFORMATION**

**Business Name:** 

MWSH BOTHELL LLC

**UBI** Number: 602 643 261

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

**Business Status:** 

ACTIVE

Principal Office Street Address:

3425 BOONE RD SE, SALEM, OR, 97317-9336, UNITED STATES

Principal Office Mailing Address:

3425 BOONE RD SE, SALEM, OR, 97317-9336

**Expiration Date:** 08/31/2023

Jurisdiction:

**UNITED STATES, OREGON** 

Formation/Registration Date:

08/18/2006

Period of Duration:

**PERPETUAL** 

Inactive Date:

Nature of Business:

ASSISTED LIVING COMMUNITY

#### REGISTERED AGENT RCW 23.95.410

**Registered Agent Name Street Address Mailing Address** 300 DESCHUTES WAY SW STE 208 MC-300 DESCHUTES WAY SW STE 208 MC-**CORPORATION** CSC1, TUMWATER, WA, 98501, UNITED CSC1, TUMWATER, WA, 98501, UNITED SERVICE COMPANY **STATES** 

**STATES** 

## PRINCIPAL OFFICE

Phone:

Email:

ANNUALREPORTS@CSCGLOBAL.COM

Work Order #: 2022080300484877 - 1 Received Date: 08/03/2022 Amount Received: \$60.00 Street Address:

3425 BOONE RD SE, SALEM, OR, 97317-9336, USA

Mailing Address:

3425 BOONE RD SE, SALEM, OR, 97317-9336, USA

### **GOVERNORS**

Title Type Entity Name First Name Last Name

GOVERNOR ENTITY MOUNTAIN WEST SENIOR HOUSING LLC

#### NATURE OF BUSINESS

ASSISTED LIVING COMMUNITY

#### **EFFECTIVE DATE**

Effective Date:

08/03/2022

#### CONTROLLING INTEREST

- 1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements? **NO**
- 2. In the **past 12 months**, has there been a transfer of at least 16-2/3 percent of the ownership, stock, or other financial interest in the entity?

NO

a. If "Yes", in the **past 36 months**, has there been a transfer of controlling interest (50 percent or greater) of the ownership, stock, or other financial interest in the entity?

NO

3. If you answered "Yes" to question 2a, has a controlling interest transfer return been filed with the Department of Revenue?

You must submit a Controlling Interest Transfer Return form if you answered "yes" to questions 1 and 2a.

Failure to report a Controlling Interest Transfer is subject to penalty provisions of RCW 82.45.220.

For more information on **Controlling Interest**, visit www.dor.wa.gov/REET.

#### RETURN ADDRESS FOR THIS FILING

Attention:

Email:

Address:

#### UPLOAD ADDITIONAL DOCUMENTS

Do you have additional documents to upload? No

#### **EMAIL OPT-IN**

By checking this box, I hereby opt into receiving all notifications from the Secretary of State for this entity via email only. I acknowledge that I will no longer receive paper notifications.

Amount Received: \$60.00

AUTHORIZED PERSON
☐ I am an authorized person.
Person Type: INDIVIDUAL
First Name: KELLEY D.
Last Name: HAMILTON
Title:  ☐ This document is hereby executed under penalty of law and is to the best of my knowledge, true and correct.