

Filed Secretary of State State of Washington Date Filed: 05/10/2019 Effective Date: 05/10/2019 UBI #: 603 017 076

# **Annual Report**

## **BUSINESS INFORMATION**

**Business Name:** 

WILLIAMS INVESTMENTS I LLC

**UBI** Number: 603 017 076

Business Type:

WA LIMITED LIABILITY COMPANY

**Business Status:** 

ACTIVE

Principal Office Street Address:

19801 50TH AVE W, LYNNWOOD, WA, 98036-6416, UNITED STATES

Principal Office Mailing Address:

19801 50TH AVE W, LYNNWOOD, WA, 98036-6416, UNITED STATES

Expiration Date: 05/31/2020

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

05/11/2010

Period of Duration:

**PERPETUAL** 

Inactive Date:

Nature of Business:

**REAL ESTATE** 

#### REGISTERED AGENT RCW 23.95.410

**Registered Agent Street Address Mailing Address** Name

**ROBERT** 1215 4TH AVE STE 1901, SEATTLE, WA, 1215 4TH AVE STE 1901, SEATTLE, WA,

**DENORMANDIE** 98161-1025, UNITED STATES 98161-1025, UNITED STATES

PRINCIPAL OFFICE

Phone:

Email:

PETE@DENORMANDIESIDLO.COM

Street Address:

19801 50TH AVE W, LYNNWOOD, WA, 98036-6416, USA

Mailing Address:

19801 50TH AVE W, LYNNWOOD, WA, 98036-6416, USA

### **GOVERNORS**

Title	Type	<b>Entity Name</b>	First Name	Last Name
GOVERNOR	INDIVIDUAL		JARI	WILLIAMS

### NATURE OF BUSINESS

REAL ESTATE

### **EFFECTIVE DATE**

Effective Date:

05/10/2019

### CONTROLLING INTEREST

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

### YES

2. Has there been a transfer of stock, other financial interest change, or an option agreement exercised during the last 12 months that resulted in a transfer of controlling interest?

#### NO

3. Has an option agreement been executed in the last 12 months allowing for the future purchase or acquisition of the entity, that, if exercised would result in a transfer of controlling interest?

#### NO

You must contact the Washington State Department of Revenue to report a Controlling Interest Transfer IF:

\* This company owns land, buildings or other real estate in Washington State,

#### AND

\* Answered "YES" to questions 2 or 3 above.

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

For more information on **Controlling Interest**, please call the Department of Revenue at (360) 534-1503, option 1, or visit www.dor.wa.gov/REET

### RETURN ADDRESS FOR THIS FILING

Attention:

### ROBERT DENORMANDIE

Email:

### PETE@DENORMANDIESIDLO.COM

Address

1215 4TH AVE STE 1901, SEATTLE, WA, 98161-1025, USA

## UPLOAD ADDITIONAL DOCUMENTS

Do you have additional documents to upload? No

### EMAIL OPT-IN

By checking this box	I hereby ont into	receiving all no	otifications from	the Secretary	of State for this	s entity vi	a email onl	v I
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AUTHORIZED PERSON

I am an authorized person.

Person Type:
INDIVIDUAL

First Name:
ANNE

Last Name:
HERTEL

Title:

PARALEGAL

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

acknowledge that I will no longer receive paper notifications.

This document is a public record. For more information visit <a href="www.sos.wa.gov/corps">www.sos.wa.gov/corps</a>

Work Order #: 2019051000246818 - 1 Received Date: 05/10/2019

Amount Received: \$60.00