



WASHINGTON
Secretary of State
Corporations & Charities Division

Filed
Secretary of State
State of Washington
Date Filed: 05/09/2023
Effective Date: 05/09/2023
UBI #: 601 884 977

EXPRESS ANNUAL REPORT WITHOUT CHANGES

BUSINESS INFORMATION

Business Name:
SKOTDAL PRIME PROPERTIES II, L.L.C.

UBI Number:
601 884 977

Business Type:
WA LIMITED LIABILITY COMPANY

Business Status:
ACTIVE

Principal Office Street Address:
1604 HEWITT AVE STE 200, EVERETT, WA, 98201-3515, UNITED STATES

Principal Office Mailing Address:
PO BOX 5267, EVERETT, WA, 98206-5267, UNITED STATES

Expiration Date:
06/30/2024

Jurisdiction:
UNITED STATES, WASHINGTON

Formation/Registration Date:
06/25/1998

Period of Duration:
06/25/2028

Inactive Date:

Nature of Business:
REAL ESTATE

REGISTERED AGENT [RCW 23.95.410](#)

Registered Agent Name	Street Address	Mailing Address
CRAIG G SKOTDAL	1604 HEWITT AVE STE 200, EVERETT, WA, 98201-3515, UNITED STATES	PO BOX 5267, EVERETT, WA, 98206-0000, UNITED STATES

GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		CRAIG	SKOTDAL

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?

- No

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.

CONFIRMATION EMAIL ADDRESS

Note: Please enter in the email address you would like confirmation sent of this annual report and payment receipt.

Email Address:

CONNIE@SKOTDAL.COM

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.

AUTHORIZED PERSON

Person Type:

INDIVIDUAL

First Name:

CONNIE

Last Name:

FISHER

Title:

ADMINISTRATION MANAGER

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