



**WASHINGTON**  
**Secretary of State**  
**Corporations & Charities Division**

Filed  
Secretary of State  
State of Washington  
Date Filed: 12/09/2022  
Effective Date: 12/09/2022  
UBI #: 602 790 451

## Annual Report

### BUSINESS INFORMATION

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Business Name:

**CEDAR TERRACE FOURPLEXES LLC**

UBI Number:

**602 790 451**

Business Type:

**WA LIMITED LIABILITY COMPANY**

Business Status:

**ACTIVE**

Principal Office Street Address:

**2024 NW BLUE RIDGE DR, SEATTLE, WA, 98177-5428, UNITED STATES**

Principal Office Mailing Address:

**2024 NW BLUE RIDGE DR, SEATTLE, WA, 98177-5428, UNITED STATES**

Expiration Date:

**12/31/2023**

Jurisdiction:

**UNITED STATES, WASHINGTON**

Formation/Registration Date:

**12/20/2007**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**REAL ESTATE**

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

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| Registered Agent Name | Street Address  | Mailing Address                                      |
|-----------------------|---|--|
| GORDON<br>CAPRETTO    | 2024 NW BLUE RIDGE DR, SEATTLE, WA, 98177-5428, UNITED STATES | PO BOX 33889, SEATTLE, WA, 98133-0889, UNITED STATES |

### PRINCIPAL OFFICE

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Phone:

**2067184551**

Email:

**GASCAP85@AOL.COM**

Street Address:

**2024 NW BLUE RIDGE DR, SEATTLE, WA, 98177-5428, USA**

Mailing Address:

**2024 NW BLUE RIDGE DR, SEATTLE, WA, 98177-5428, USA**

## GOVERNORS

| Title    | Type       | Entity Name | First Name | Last Name |
|----------|------------|-------------|------------|-----------|
| GOVERNOR | INDIVIDUAL |             | GORDON     | CAPRETTO  |

## NATURE OF BUSINESS

REAL ESTATE

## EFFECTIVE DATE

Effective Date:

**12/09/2022**

## 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?

**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](http://www.dor.wa.gov/REET).

## RETURN ADDRESS FOR THIS FILING

Attention:

**GORDON CAPRETTO**

Email:

**GASCAP85@AOL.COM**

Address:

**PO BOX 33889, SEATTLE, WA, 98133-0889, USA**

## UPLOAD ADDITIONAL DOCUMENTS

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

## AUTHORIZED PERSON

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☒ I am an authorized person.

Person Type:

**INDIVIDUAL**

First Name:

**GORDON**

Last Name:

**CAPRETTO**

Title:

**OWNER / OPERATOR**

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