



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

Filed  
Secretary of State  
State of Washington  
Date Filed: 02/13/2024  
Effective Date: 02/13/2024  
UBI #: 602 480 955

## EXPRESS ANNUAL REPORT WITHOUT CHANGES

### BUSINESS INFORMATION

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Business Name:

**CHRISTOPHER C. EPPING F.P., LLC**

UBI Number:

**602 480 955**

Business Type:

**WA LIMITED LIABILITY COMPANY**

Business Status:

**ACTIVE**

Principal Office Street Address:

**6947 COAL CREEK PKWY SE # 192, NEWCASTLE, WA, 98059-3136, UNITED STATES**

Principal Office Mailing Address:

**6947 COAL CREEK PKWY SE # 192, NEWCASTLE, WA, 98059-3136, UNITED STATES**

Expiration Date:

**03/31/2025**

Jurisdiction:

**UNITED STATES, WASHINGTON**

Formation/Registration Date:

**03/08/2005**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**REAL PROPERTY INVESTMENT**

REGISTERED AGENT [RCW 23.95.410](#)

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Registered Agent Name	Street Address	Mailing Address
CHRISTOPHER C EPPING	11807 SE 75TH PL, NEWCASTLE, WA, 98056-0000, UNITED STATES	6947 COAL CREEK PKWY SE # 192, NEWCASTLE, WA, 98059-3136, UNITED STATES

### GOVERNORS

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Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		CHRISTOPHER	EPPING

**CONTROLLING INTEREST**

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1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements?

- **Yes**

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).

**CONFIRMATION EMAIL ADDRESS**

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

Email Address:

**EPIC1999@HOTMAIL.COM**

**EMAIL OPT-IN**

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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**

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Person Type:

**INDIVIDUAL**

First Name:

**MICHELLE**

Last Name:

**EPPING**

Title:

**MEMBER, LLC**

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