



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

Filed  
Secretary of State  
State of Washington  
Date Filed: 01/22/2024  
Effective Date: 01/22/2024  
UBI #: 601 933 456

## Annual Report

### BUSINESS INFORMATION

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Business Name:

**SHIBAYAMA ASSOCIATES, L.L.C.**

UBI Number:

**601 933 456**

Business Type:

**WA LIMITED LIABILITY COMPANY**

Business Status:

**ACTIVE**

Principal Office Street Address:

**23000 EDMONDS WAY, #104, EDMONDS, WA, 98020-8200, UNITED STATES**

Principal Office Mailing Address:

**PO BOX 713, MERCER ISLAND, WA, 98040-0713, UNITED STATES**

Expiration Date:

**02/28/2025**

Jurisdiction:

**UNITED STATES, WASHINGTON**

Formation/Registration Date:

**02/18/1999**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**APARTMENT REAL ESTATE RENTAL**

REGISTERED AGENT [RCW 23.95.410](#)

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Registered Agent Name	Street Address	Mailing Address
REGISTERED AGENT SOLUTIONS, INC.	3400 CAPITOL BLVD SE #101, TUMWATER, WA, 98501, UNITED STATES	PO BOX 1368, OLYMPIA, WA, 98507, UNITED STATES

### PRINCIPAL OFFICE

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Phone:

**8887057274**

Email:

**ARS@RASI.COM**

Street Address:  
**23000 EDMONDS WAY, #104, EDMONDS, WA, 98020-8200, USA**

Mailing Address:  
**PO BOX 713, MERCER ISLAND, WA, 98040-0713, USA**

#### GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		BRIAN	SHIBAYAMA
GOVERNOR	INDIVIDUAL		DEAN	SHIBAYAMA
GOVERNOR	INDIVIDUAL		KARL	SHIBAYAMA
GOVERNOR	INDIVIDUAL		EIKO	SHIBAYAMA

#### NATURE OF BUSINESS

- APARTMENT REAL ESTATE RENTAL

#### EFFECTIVE DATE

Effective Date:  
**01/22/2024**

#### CONTROLLING INTEREST

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).

#### RETURN ADDRESS FOR THIS FILING

Attention:  
Email:  
Address:

#### UPLOAD ADDITIONAL DOCUMENTS

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

#### AUTHORIZED PERSON

☒ I am an authorized person.

Person Type:  
**INDIVIDUAL**

First Name:  
**EMILIA**

Last Name:

**DUNST**

Title:

**AUTHORIZED FILER**



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