

Filed
Secretary of State
State of Washington
Date Filed: 10/31/2018
Effective Date: 10/31/2018
UBI #: 603 251 359

# **Annual Report**

## **BUSINESS INFORMATION**

**Business Name:** 

AVALON ALDERWOOD PHASE I, LLC

UBI Number: **603 251 359** 

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

**Business Status:** 

**ACTIVE** 

Principal Office Street Address:

671 N GLEBE RD STE 800, ARLINGTON, VA, 22203, UNITED STATES

Principal Office Mailing Address:

671 N GLEBE RD STE 800, ARLINGTON, VA, 22203

Expiration Date: **11/30/2019** 

Jurisdiction:

UNITED STATES, DELAWARE

Formation/Registration Date:

11/05/2012

Period of Duration:

**PERPETUAL** 

Inactive Date:

Nature of Business:

REAL ESTATE

## REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address

**Mailing Address** 

C T CORPORATION SYSTEM 711 CAPITOL WAY S STE 204, OLYMPIA,

WA, 98501, UNITED STATES

711 CAPITOL WAY S STE 204, OLYMPIA, WA, 98501, UNITED STATES

PRINCIPAL OFFICE

Phone:

703-329-6300

Email:

LORA\_ROSS@AVALONBAY.COM

Work Order #: 2018103100511313 - 1 Received Date: 10/31/2018

Amount Received: \$60.00

Street Address:

671 N GLEBE RD STE 800, ARLINGTON, VA, 22203, USA

Mailing Address:

671 N GLEBE RD STE 800, ARLINGTON, VA, 22203, USA

## **GOVERNORS**

Title Type Entity Name First Name Last Name

GOVERNOR ENTITY AVALONBAY COMMUNITIES, INC.

### NATURE OF BUSINESS

REAL ESTATE

### **EFFECTIVE DATE**

Effective Date:

10/31/2018

## 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:

#### **LORA ROSS**

Email:

### LORA\_ROSS@AVALONBAY.COM

Address:

671 N GLEBE ROAD, SUITE 800, ARLINGTON, VA, 22203, USA

## **UPLOAD ADDITIONAL DOCUMENTS**

Do you have additional documents to upload? No

### EMAIL OPT-IN

| By checking this box, | I haraby out into    | racciving all | natifications | from the Coeratory | of State for | thic antity wi | a amail only I     |
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Work Order #: 2018103100511313 - 1 Received Date: 10/31/2018 Amount Received: \$60.00 acknowledge that I will no longer receive paper notifications.

# **AUTHORIZED PERSON**

I am an authorized person.

Person Type:

**ENTITY** 

First Name:

**EDWARD** 

Last Name:

**SCHULMAN** 

Entity Name:

AVALONBAY COMMUNITIES, INC.

Title:

**EVP, GC & SECRETARY** 

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

Work Order #: 2018103100511313 - 1 Received Date: 10/31/2018

**Amount Received: \$60.00**