



Annual Report

BUSINESS INFORMATION

Business Name:

TEAL LAKE VILLAGE ASSOCIATION

UBI Number:

601 394 704

Business Type:

WA NONPROFIT CORPORATION

Business Status:

ACTIVE

Principal Office Street Address:

147 SEAWAY PL, PORT LUDLOW, WA, 98365-9573, UNITED STATES

Principal Office Mailing Address:

PO BOX 65011, PORT LUDLOW, WA, 98365-0011, UNITED STATES

Expiration Date:

06/30/2024

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

06/10/1992

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

HOMEOWNERS ASSOCIATION

NONPROFIT GROSS REVENUE CERTIFICATION

Per [RCW 24.03A.960](#) does the Nonprofit certify that its total gross revenue in the most recent fiscal year was less than \$500,000?

- Yes

NONPROFIT CORPORATION'S EIN

Nonprofit EIN: **91-1565679**

REGISTERED AGENT [RCW 23.95.410](#)

Registered Agent Name	Street Address	Mailing Address
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TOM SPRANDEL 147 SEAWAY PL, PORT LUDLOW, WA, 98365-9573, UNITED STATES PO BOX 65011, PORT LUDLOW, WA, 98365-0011, UNITED STATES

PRINCIPAL OFFICE

Phone:

8472193784

Email:

TOMSPRANDEL@PM.ME

Street Address:

147 SEAWAY PL, PORT LUDLOW, WA, 98365-9573, USA

Mailing Address:

PO BOX 65011, PORT LUDLOW, WA, 98365-0011, USA

GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		TOM	SPRANDEL
GOVERNOR	INDIVIDUAL		CLAUS	SVENDSEN
GOVERNOR	INDIVIDUAL		DAVID	HANSON
GOVERNOR	INDIVIDUAL		SHEILA	TWOHEY
GOVERNOR	INDIVIDUAL		CHRIS	WOLLE

NATURE OF BUSINESS

HOMEOWNERS ASSOCIATION

CHARITABLE NONPROFIT CORPORATION

Is the Nonprofit Corporation a Charitable Nonprofit as defined by [RCW 24.03A.010\(6\)](#)? - **No**

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.

RETURN ADDRESS FOR THIS FILING

Attention:

TOM SPRANDEL

Email:

TOMSPRANDEL@PM.ME

Address:

147 SEAWAY PL, PORT LUDLOW, WA, 98365-9573, USA

UPLOAD ADDITIONAL DOCUMENTS

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

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

I am an authorized person.

Person Type:

INDIVIDUAL

First Name:

TOM

Last Name:

SPRANDEL

Title:

TREASURER

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