2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000004570

1. Entity Name

CITY-ST-ZIP

HAWTHORNE VILLAGE INVESTORS LLC



FILED Apr 29, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2801 ALASKAN WAY, SUITE 200 SEATTLE, WA 98121 2801 ALASKAN WAY, SUITE 200 SEATTLE, WA 98121



04242008 No Chg-LLC

CR2E083 (12/07)

4. FEi Number		Applied For
20-1782258		Not Applicable
5. Certificate of Status Desired		D Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both, in the St	ate of Florida I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
FILE After May	E NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		00000932565 2/00 88860 010 138.75
9.	MANAGING MEMBERS/MANAGERS	Note and the	<u>2,00 00000 010 190 19</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HARRELSON, STANLEY J 2801 ALASKAN WAY, SUITE 200 SEATTLE, WA 98121		
NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	Γ WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _	N/C	- Otan Harrelson
	MID TYPED OR PRINTED NAM	E OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04 25 2008

(206) 215.9700)

Daytime Phone #