

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1200002200

**Entity Name:** COLLIERS INTERNATIONAL WA, LLC

**Current Principal Place of Business:**

601 UNION STREET, SUITE 5300  
SEATTLE, WA 98101

**Current Mailing Address:**

601 UNION STREET, SUITE 5300  
SEATTLE, WA 98101 US

**FEI Number: 32-0356630**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name BOROK, GIL  
Address 16830 VENTURA BOULEVARD, SUITE  
J  
City-State-Zip: ENCINO CA 91436

Title VP  
Name NELSON, SCOTT  
Address 1230 PEACHTREE STREET NE,  
PROMENADE, SUITE 800  
City-State-Zip: ATLANTA GA 30309

Title T  
Name HEMMING, ROBERT  
Address 200 GRANVILLE STREET  
19TH FLOOR  
City-State-Zip: VANCOUVER BRITISH COLUMBIA  
V6C 2R6

Title VP, MANAGING DIRECTOR,  
DESIGNATED BROKER  
Name CONDON, WILLIAM  
Address 601 UNION STREET, SUITE 5300  
City-State-Zip: SEATTLE WA 98101

Title ASSISTANT SECRETARY  
Name MAYER, CHRISTIAN  
Address 1140 BAY STREET, SUITE 4000  
City-State-Zip: TORONTO ON M5S 2Z4

Title MGR, S  
Name HAWKINS, MATTHEW  
Address 1140 BAY STREET, SUITE 4000  
City-State-Zip: TORONTO ON M5S 2Z4

Title ASST. SECRETARY  
Name SCHWAB, GEORGE L. IV  
Address 1114 SIXTH AVENUE, 12TH FLOOR  
City-State-Zip: NEW YORK NY 10036

Title SR. VP  
Name BLANTON, FRANK  
Address 16830 VENTURA BLVD., SUITE J  
City-State-Zip: ENCINO CA 91436

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MATTHEW HAWKINS**

**MANAGER**

**04/27/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title VP  
Name WHITT, KAREN  
Address 1110 NORTH GLEBE ROAD, SUITE 610  
City-State-Zip: ARLINGTON VA 22201

Title VP  
Name WOODROW, MARTIN  
Address 4643 SOUTH ULSTER STREET, SUITE 1000  
City-State-Zip: DENVER CO 80237

Title VP  
Name MORGAN, KEVIN  
Address 5520 KIETZKE LANE, SUITE 300  
City-State-Zip: RENO NV 89511

Title MANAGING DIRECTOR  
Name DIXON, RANDY  
Address 301 UNIVERSITY AVE, SUITE 100  
City-State-Zip: SACRAMENTO CA 95825