



Filed
Secretary of State
State of Washington
Date Filed: 11/12/2021
Effective Date: 11/12/2021
UBI #: 604 645 153

Amended Annual Report

BUSINESS INFORMATION

Business Name:

SOCIAL SAFETY FEDERATION

UBI Number:

604 645 153

Business Type:

WA NONPROFIT CORPORATION

Business Status:

ACTIVE

Principal Office Street Address:

4580 KLAHANIE DR SE # 305, SAMMAMISH, WA, 98029-5812, UNITED STATES

Principal Office Mailing Address:

3849 KLAHANIE DR SE, 3-201, SAMMAMISH, WA, 98029-5721, UNITED STATES

Expiration Date:

08/31/2022

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

08/14/2020

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

EDUCATIONAL

REGISTERED AGENT CONSENT

To change your Registered Agent, please delete the current Registered Agent below.

Registered Agent Consent (Check One):

I am the Registered Agent. Use my Contact Information.

I am not the Registered Agent. I declare under penalty of perjury that the WA Nonprofit Corporation has in its records a signed document containing the consent of the person or business named as registered agent to serve in that capacity. I understand the WA Nonprofit Corporation must keep the signed consent document in its records, and must produce the document on request.

RCW [23.95.415](#) requires that all businesses in Washington State have a Registered Agent. Some of this information is prepopulated from information previously provided. Please make changes as necessary to provide accurate information.

REGISTERED AGENT [RCW 23.95.410](#)

Registered Agent Name	Street Address	Mailing Address
LUCIE SHANNON	3849 KLAHANIE DR SE, 3-201, SAMMAMISH, WA, 98029, USA	3849 KLAHANIE DR SE, 3-201, SAMMAMISH, WA, 98029, USA

PRINCIPAL OFFICE

Phone:
4255998802

Email:
INFO@SOCIALSAFETYINITIATIVE.ORG

Street Address:
4580 KLAHANIE DR SE # 305, SAMMAMISH, WA, 98029-5812, USA

Mailing Address:
3849 KLAHANIE DR SE, 3-201, SAMMAMISH, WA, 98029-5721, USA

GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		JEREMY	FERGUSON
GOVERNOR	INDIVIDUAL		EMMI	BANE
GOVERNOR	INDIVIDUAL		ANNA	HUTCHESON
GOVERNOR	INDIVIDUAL		PAUL	REYES
GOVERNOR	INDIVIDUAL		DANA	GOLD

NATURE OF BUSINESS

EDUCATIONAL

EFFECTIVE DATE

Effective Date:
11/12/2021

RETURN ADDRESS FOR THIS FILING

Attention:
LUCIE J SHANNON
Email:
INFO@SOCIALSAFETYINITIATIVE.ORG
Address:
4580 KLAHANIE DR SE # 305, SAMMAMISH, WA, 98029, USA

UPLOAD ADDITIONAL DOCUMENTS

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

AUTHORIZED PERSON

I am an authorized person.

Person Type:

ENTITY

First Name:

LUCIE

Last Name:

SHANNON

Entity Name:

SOCIAL SAFETY FEDERATION

Title:

OPERATIONS DIRECTOR

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



Filed
Secretary of State
State of Washington
Date Filed: 06/24/2021
Effective Date: 06/24/2021
UBI #: 604 645 153

Amended Annual Report

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SOCIAL SAFETY FEDERATION

UBI Number:

604 645 153

Business Type:

WA NONPROFIT CORPORATION

Business Status:

ACTIVE

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GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		JEREMY	FERGUSON
GOVERNOR	INDIVIDUAL		EMMI	BANE
GOVERNOR	INDIVIDUAL		RYAN	WALKER
GOVERNOR	INDIVIDUAL		ANNA	HUTCHESON

NATURE OF BUSINESS

EDUCATIONAL

EFFECTIVE DATE

Effective Date:

06/24/2021

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Attention:

LUCIE J SHANNON

Email:

LUCIE@SOCIALSAFETYINITIATIVE.ORG

Address:

4580 KLAHANIE DR SE, #305, SAMMAMISH, WA, 98029-5812, USA

UPLOAD ADDITIONAL DOCUMENTS

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

AUTHORIZED PERSON

I am an authorized person.

Person Type:

ENTITY

First Name:

LUCIE

Last Name:

SHANNON

Entity Name:

SOCIAL SAFETY INITIATIVE

Title:

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Filed
Secretary of State
State of Washington
Date Filed: 06/03/2021
Effective Date: 06/03/2021
UBI #: 604 645 153

Annual Report

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UBI Number:

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GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		LORELEI	WALKER
GOVERNOR	INDIVIDUAL		JEREMY	FERGUSON
GOVERNOR	INDIVIDUAL		EMMI	BANE
GOVERNOR	INDIVIDUAL		RYAN	WALKER
GOVERNOR	INDIVIDUAL		ANNA	HUTCHESON

NATURE OF BUSINESS

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06/03/2021

CONTROLLING INTEREST

1. Does your entity own real property such as land or buildings (including leasehold interests) in Washington?

NO

2. As of January 1, 2019, has there been a transfer of stock, other financial interest change, or an option agreement exercised that resulted in a transfer of at least 16% percent interest in the entity?

NO

a. If "yes", has the transfer of stock, other financial interest change, or an option agreement exercised resulted in a transfer of controlling interest (50 percent or greater)?

NO

3. As of January 1, 2019, has an option agreement been executed allowing for the future purchase or acquisition of the entity?

NO

You must report a [Controlling Interest Transfer Return](#) **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:

LUCIE J SHANNON

Email:

LUCIE@SOCIALSAFETYINITIATIVE.ORG

Address:

3849 KLAHANIE DR SE, 3-203, SAMMAMISH, WA, 98029-5721, USA

UPLOAD ADDITIONAL DOCUMENTS

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

AUTHORIZED PERSON

I am an authorized person.

Person Type:

INDIVIDUAL

First Name:

LUCIE

Last Name:

SHANNON

Title:

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Filed
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Amended Annual Report

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GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	SOCIAL SAFETY FEDERATION	LUCIE	SHANNON
GOVERNOR	ENTITY	SOCIAL SAFETY FEDERATION	LORELEI	WALKER

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AUTHORIZED PERSON

I am an authorized person.

Person Type:
INDIVIDUAL

First Name:
LORELEI

Last Name:
WALKER

Title:
VICE PRESIDENT

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State of Washington
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GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	SOCIAL SAFETY FEDERATION	LUCIE	SHANNON

NATURE OF BUSINESS

EDUCATIONAL

EFFECTIVE DATE

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04/05/2021

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Address:
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UPLOAD ADDITIONAL DOCUMENTS

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

AUTHORIZED PERSON

I am an authorized person.

Person Type:

INDIVIDUAL

First Name:

LUCIE

Last Name:

SHANNON

Title:

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State of Washington
Date Filed: 01/12/2021
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Amended Annual Report

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SOCIAL SAFETY FEDERATION

UBI Number:

604 645 153

Business Type:

WA NONPROFIT CORPORATION

Business Status:

ACTIVE

Principal Office Street Address:

13411 MANOR WAY, LYNNWOOD, WA, 98087, UNITED STATES

Principal Office Mailing Address:

13411 MANOR WAY, LYNNWOOD, WA, 98087, UNITED STATES

Expiration Date:

08/31/2021

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

08/14/2020

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

EDUCATIONAL

REGISTERED AGENT [RCW 23.95.410](#)

Registered Agent Name	Street Address	Mailing Address
LUCIE SHANNON	13411 MANOR WAY, LYNNWOOD, WA, 98087-5624, UNITED STATES	13411 MANOR WAY, LYNNWOOD, WA, 98087-5624, UNITED STATES

PRINCIPAL OFFICE

Phone:

425-599-8802

Email:

INFO@SOCIALSAFETYINITIATIVE.ORG

Street Address:

13411 MANOR WAY, LYNNWOOD, WA, 98087, USA

Mailing Address:

13411 MANOR WAY, LYNNWOOD, WA, 98087, USA

GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	SOCIAL SAFETY FEDERATION	LUCIE	SHANNON

NATURE OF BUSINESS

| EDUCATIONAL

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Email:

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Address:

13411 MANOR WAY, LYNNWOOD, WA, 98087-5624, USA

UPLOAD ADDITIONAL DOCUMENTS

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

AUTHORIZED PERSON

I am an authorized person.

Person Type:

ENTITY

First Name:

LUCIE

Last Name:

SHANNON

Entity Name:

SOCIAL SAFETY FEDERATION

Title:

EXECUTIVE DIRECTOR

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