



Filed  
 Secretary of State  
 State of Washington  
 Date Filed: 10/01/2024  
 Effective Date: 10/01/2024  
 UBI #: 601 403 255

## Annual Report

### BUSINESS INFORMATION

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Business Name:  
**HONEYMOON BAY HEIGHTS PROPERTY OWNERS ASSOCIATION**

UBI Number:  
**601 403 255**

Business Type:  
**WA NONPROFIT CORPORATION**

Business Status:  
**ACTIVE**

Principal Office Street Address:  
**1127 SHERWOOD LN, GREENBANK, WA, 98253-6381, UNITED STATES**

Principal Office Mailing Address:  
**PO BOX 223, FREELAND, WA, 98249-0223, UNITED STATES**

Expiration Date:  
**11/30/2025**

Jurisdiction:  
**UNITED STATES, WASHINGTON**

Formation/Registration Date:  
**11/02/1984**

Period of Duration:  
**PERPETUAL**

Inactive Date:

Nature of Business:  
**HOMEOWNERS ASSOCIATION**

### NONPROFIT GROSS REVENUE CERTIFICATION

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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

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Nonprofit EIN: **91-1573187**

### REGISTERED AGENT [RCW 23.95.410](#)

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Registered Agent Name	Street Address	Mailing Address
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ROBERT DUFFY 1127 SHERWOOD LN, GREENBANK, WA, 98253-6381,  
UNITED STATES

PO BOX 476, FREELAND, WA, 98249-0476,  
UNITED STATES

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#### PRINCIPAL OFFICE

Phone:  
**3609293027**

Email:  
**RLDUFFY@PARALLAXSYSTEMSINC.COM**

Street Address:  
**1127 SHERWOOD LN, GREENBANK, WA, 98253-6381, USA**

Mailing Address:  
**PO BOX 223, FREELAND, WA, 98249-0223, USA**

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#### GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		ROBERT	DUFFY
GOVERNOR	INDIVIDUAL		CATHY	RUSSELL
GOVERNOR	INDIVIDUAL		DAN	SMITH

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#### NATURE OF BUSINESS

- HOMEOWNERS ASSOCIATION

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#### CHARITABLE NONPROFIT CORPORATION

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

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#### CONTROLLING INTEREST

1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements?  
- **No**
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](http://www.dor.wa.gov/REET).

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#### RETURN ADDRESS FOR THIS FILING

Attention:  
Email:  
Address:

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#### UPLOAD ADDITIONAL DOCUMENTS

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

AUTHORIZED PERSON

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I am an authorized person.

Person Type:

**ENTITY**

First Name:

**ROBERT**

Last Name:

**DUFFY**

Entity Name:

**HONEYMOON BAY POA**

Title:

**SECRETARY/TREASURER**

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