

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000005182

**FILED**  
**Apr 18, 2008**  
**Secretary of State**

**Entity Name:** FAEC HOLDINGS (EP), LLC

**Current Principal Place of Business:**

3760 KILROY AIRPORT WAY  
SUITE 300  
LONG BEACH, CA 90806

**New Principal Place of Business:**

**Current Mailing Address:**

3760 KILROY AIRPORT WAY  
SUITE 300  
LONG BEACH, CA 90806

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HEALTHCARE PROPERTY, INVESTORS, INC  
Address: 3760 KILROY AIRPORT WAY  
City-St-Zip: LONG BEACH, CA 90806

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: EDWARD J. HENNING                      MGR                      04/18/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date