

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000001705

**Entity Name:** TAMPA HCP, LLC

**Current Principal Place of Business:**

4600 S SYRACUSE STREET, STE 500  
DENVER, CO 80237

**Current Mailing Address:**

4600 S SYRACUSE STREET, STE 500  
DENVER, CO 80237 US

**FEI Number:** 03-0467291

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MEMBER  
Name HEALTHPEAK OP, LLC  
Address 4600 S SYRACUSE STREET, STE 500  
City-State-Zip: DENVER CO 80237

*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:** HEALTHPEAK OP, LLC

MEMBER

04/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date