

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005348

Entity Name: WMPT PALMS WEST III MANAGEMENT, L.L.C.

Current Principal Place of Business:

4500 DORR STREET
TOLEDO, OH 43615

Current Mailing Address:

4500 DORR STREET
TOLEDO, OH 43615 US

FEI Number: 20-3520359

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 WINDROSE MEDICAL PROPERTIES
L.P.
Address 4500 DORR STREET
City-State-Zip: TOLEDO OH 43615

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: ERIN C. IBELE

AUTHORIZED SIGNER

04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date