

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000007383

**Entity Name:** WEST PALM BEACH 927 MEDICAL PROPERTIES, LLC

**Current Principal Place of Business:**

ONE TOWN CENTER RD  
STE 300  
BOCA RATON, FL 33486

**Current Mailing Address:**

ONE TOWN CENTER RD  
STE 300  
BOCA RATON, FL 33486 US

**FEI Number:** 81-3825822

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
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:** JOANNE CASWELL, ASSISTANT SECRETARY

07/27/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	MB REAL ESTATE	Name	REITER, RUSSELL
Address	C/O MB REAL ESTATE 22 W LAKE BEAUTY DRIVE SUITE 201	Address	ONE TOWN CENTER RD STE 300
City-State-Zip:	ORLANDO FL 32806	City-State-Zip:	BOCA RATON FL 33486

*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:** MEEGAN MOTISI

**AUTHORIZED PERSON**

07/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date