

2024 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B13000000294

Entity Name: VENTAS REALTY CAPITAL HEALTHCARE TRUST OPERATING PARTNERSHIP, L.P.

FILED
May 01, 2024
Secretary of State
4649507176CC

Current Principal Place of Business:

500 NORTH HURSTBOURNE PARKWAY
SUITE 200
LOUISVILLE, KY 40222

Current Mailing Address:

500 NORTH HURSTBOURNE PARKWAY
SUITE 200
LOUISVILLE, KY 40222 US

FEI Number: 27-3306526

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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

General Partner Detail :

Document #

Name STRIPE SUB, LLC

Address 500 NORTH HURSTBOURNE
PARKWAY
SUITE 200

City-State-Zip: LOUISVILLE KY 40222

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANA J BAKER

SECRETARY

05/01/2024

_____ Electronic Signature of Signing General Partner Detail

_____ Date