

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000126

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: HCP RP1-VB, LLC

**Current Principal Place of Business:**

420 S. ORANGE AVE.  
SUITE 500  
ORLANDO, FL 32801

**New Principal Place of Business:**

3760 KILROY AIRPORT WAY  
SUITE 300  
LONG BEACH, CA 90806

**Current Mailing Address:**

420 S. ORANGE AVENUE  
SUITE 500  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 14-1879396      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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: MGR ( ) Delete  
Name: SENEFF, JAMES M JR  
Address: 450 S. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: BOURNE, ROBERT A  
Address: 450 S. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: BEEBE, STUART J  
Address: 420 S. ORANGE AVE., SUITE 500  
City-St-Zip: ORLANDO, FL 32801

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: D (X) Change ( ) Addition  
Name: HENNING, EDWARD J  
Address: 3760 KILROY AIRPORT WAY, SUITE 300  
City-St-Zip: LONG BEACH, CA 90806

Title: CEO (X) Change ( ) Addition  
Name: FLAHERTY, JAMES F  
Address: 3760 KILROY AIRPORT WAY, SUITE 300  
City-St-Zip: LONG BEACH, CA 90806

Title: CFO (X) Change ( ) Addition  
Name: WALLACE, MARK  
Address: 3760 KILROY AIRPORT WAY, SUITE 300  
City-St-Zip: LONG BEACH, CA 90806

Title: S ( ) Change (X) Addition  
Name: HENNING, EDWARD J  
Address: 3760 KILROY AIRPORT WAY SUITE 300  
City-St-Zip: LONG BEACH, CA 90806

I hereby certify that the information supplied with this filing does not qualify for the 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

D

04/18/2007

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