## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M07000002217

Entity Name: NHP SH FLORIDA, LLC

610 NEWPORT CENTER DR, SUITE 1150

NEWPORT BEACH, CA 92660

Address:

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 610 NEWPORT CENTER DR. **SUITE 1150** NEWPORT BEACH, CA 92660 **Current Mailing Address: New Mailing Address:** 610 NEWPORT CENTER DR. **SUITE 1150** NEWPORT BEACH, CA 92660 FEI Number: 95-3997619 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: () Delete Title: () Change () Addition NATIONWIDE HEALTH PROPERTIES, INC. Name: Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROGER E LATY VP 04/30/2009