## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000126

Entity Name: HCP RP1-VB, LLC

**Current Principal Place of Business:** 

1920 MAIN STREET, SUITE 1200

IRVINE. CA 92614

**Current Mailing Address:** 

1920 MAIN STREET, SUITE 1200 IRVINE, CA 92614 US

FEI Number: 14-1879396 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

**FILED** Apr 23, 2015

**Secretary of State** 

CC8250035216

## Authorized Person(s) Detail:

Title **MEMBER** 

Name HCP PARTNERS, LP

Address 1920 MAIN STREET, SUITE 1200

City-State-Zip: IRVINE CA 92614

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.

04/23/2015 SIGNATURE: BRIAN MAAS AUTHORIZED PERSON