

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001700

Entity Name: HCP EDEN1 GAINESVILLE FL, 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: 20-0183553

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

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.

SIGNATURE: ANGELA M. PLAYLE

AUTHORIZED PERSON

02/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date