

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000004735

**FILED**  
**Jan 28, 2019**  
**Secretary of State**  
**1325514997CC**

**Entity Name:** TAURUS SPRING HILL FLORIDA GP LLC

**Current Principal Place of Business:**

TWO INTERNATIONAL PLACE  
27TH FLOOR  
BOSTON, MA 02110

**Current Mailing Address:**

TWO INTERNATIONAL PLACE  
27TH FLOOR  
BOSTON, MA 02110 US

**FEI Number:** 46-3271907

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
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

**Authorized Person(s) Detail :**

Title MGRM  
Name TAURUS INVESTMENT HOLDINGS, LLC  
Address TWO INTERNATIONAL PLACE  
27TH FLOOR  
City-State-Zip: BOSTON MA 02110

Title MGR  
Name KASSOF, LINDA  
Address 610 N. WYMORE ROAD, SUITE 200  
City-State-Zip: MAITLAND FL 32751

Title MGR  
Name REIBLING, GUENTHER  
Address 610 N. WYMORE ROAD, SUITE 200  
City-State-Zip: MAITLAND FL 32751

Title MGR  
Name REIBLING, LORENZ  
Address TWO INTERNATIONAL PLACE  
27TH FLOOR  
City-State-Zip: BOSTON MA 02110

Title MGR  
Name MERRIGAN, PETER  
Address TWO INTERNATIONAL PLACE  
27TH FLOOR  
City-State-Zip: BOSTON MA 02110

Title MGR  
Name RIJNBOUT, ERIK  
Address TWO INTERNATIONAL PLACE  
27TH FLOOR  
City-State-Zip: BOSTON MA 02110

*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:** LINDA G KASSOF

**MGR**

**01/28/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date