

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000007383

Entity Name: WEST PALM BEACH 927 MEDICAL PROPERTIES, LLC

Current Principal Place of Business:

C/O KAYNE ANDERSON REAL ESTATE ADVISORS, L
ONE TOWN CENTER ROAD, STE 300
BOCA RATON, FL 33486

Current Mailing Address:

C/O KAYNE ANDERSON REAL ESTATE ADVISORS, L
ONE TOWN CENTER ROAD, STE 300
BOCA RATON, FL 33486

FEI Number: 81-3825822

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 MGR
Name MEDICAL PROPERTIES IV JV, LLC
Address ONE TOWN CENTER ROAD, STE 300
City-State-Zip: BOCA RATON FL 33486

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: RUSSELL REITER

SECRETARY

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date