

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000007577

**Entity Name:** PROTEA SENIOR LIVING BOCA RATON LLC**Current Principal Place of Business:**17 SAN SIMEON  
LAGUNA NIGUEL, CA 92677**Current Mailing Address:**17 SAN SIMEON  
LAGUNA NIGUEL, CA 92677 US**FEI Number:** 84-2522171**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
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	MBR
Name	RSFB HOLDINGS LLC
Address	101 S PHILLIPS AVE, STE 509
City-State-Zip:	SIOUX FALLS SD 57104-8736

Title	MBR
Name	PROTEA CAPITAL PARTNERS LLC
Address	17 SAN SIMEON
City-State-Zip:	LAGUNA NIGUEL CA 92677

Title	MBR
Name	HSFB HOLDINGS LLC
Address	101 S PHILLIPS AVE, STE 509
City-State-Zip:	SIOUX FALLS SD 57104-8736

Title	MBR
Name	THE ROBERT D. FRIEDMAN LIVING TRUST
Address	18800 VON KARMAN AVE, STE A
City-State-Zip:	IRVINE CA 92612

Title	MBR
Name	THE JEFFREY P. FRIEDMAN LIVING TRUST
Address	18800 VON KARMAN AVE, STE A
City-State-Zip:	IRVINE CA 92612

*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:** HANS VAN DER LAAN

01/22/2020

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