#### **2021 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B0100000280

Entity Name: SHANNON HEALTH/MOB LIMITED PARTNERSHIP NO. 1

FILED Apr 22, 2021 Secretary of State 5671304279CC

## **Current Principal Place of Business:**

1505 MARRIOTTSVILLE ROAD MARRIOTTSVILLE. MD 21104

## **Current Mailing Address:**

1505 MARRIOTTSVILLE ROAD MARRIOTTSVILLE. MD 21104 US

FEI Number: 57-1127282 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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

#### **General Partner Detail:**

Document # M01000001859

Name EA-BSD 1, L.L.C.

Address 1505 MARRIOTTSVILLE ROAD
City-State-Zip: MARRIOTTSVILLE MD 21104

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing General Partner Detail

SIGNATURE: SR. ANNE LUTZ

AUTHORIZED PERSON 04/22/2021

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