

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000002016

Entity Name: HEALTHCARE TRUST OF AMERICA, INC.

Current Principal Place of Business:

16435 N. SCOTTSDALE ROAD
SUITE 320
SCOTTSDALE, AZ 85254

Current Mailing Address:

16435 N. SCOTTSDALE ROAD
SUITE 320
SCOTTSDALE, AZ 85254 US

FEI Number: 20-4738347

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

Officer/Director Detail :

Title CFO
Name MILLIGAN, ROBERT
Address 16435 N. SCOTTSDALE ROAD
SCOTTS
City-State-Zip: SCOTTSDALE AZ 85254

Title CEO
Name PETERS, SCOTT D
Address 16435 N. SCOTTSDALE ROAD
City-State-Zip: SCOTTSDALE AZ 85254

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT MILLIGAN

OFFICER

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date