

**2023 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M01000002806

**Entity Name:** ARC DELRAY BEACH, LLC

**Current Principal Place of Business:**

111 WESTWOOD PLACE  
SUITE 400  
BRENTWOOD, TN 37027

**Current Mailing Address:**

111 WESTWOOD PLACE  
SUITE 400  
BRENTWOOD, TN 37027 US

**FEI Number: 80-0004855**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            PRESIDENT, CEO, MANAGER  
Name            BAIER, LUCINDA M  
Address        111 WESTWOOD PLACE  
                  SUITE 400  
City-State-Zip: BRENTWOOD TN 37027

Title            MANAGER, EVP AND SECRETARY  
Name            WHITE, CHAD C.  
Address        111 WESTWOOD PLACE  
                  SUITE 400  
City-State-Zip: BRENTWOOD TN 37027

Title            MANAGER AND DVP  
Name            FISCHER, LAURA E.  
Address        111 WESTWOOD PLACE  
                  SUITE 400  
City-State-Zip: BRENTWOOD TN 37027

Title            SVP  
Name            LESKOWICZ, JOANNE  
Address        6737 W WASHINGTON STREET  
                  SUITE 2300  
City-State-Zip: MILWAUKEE WI 53214

Title            CFO  
Name            KUSSOW, DAWN L.  
Address        111 WESTWOOD PLACE  
                  SUITE 400  
City-State-Zip: BRENTWOOD TN 37027

Title            MANAGER AND DVP  
Name            RICCI, BENJAMIN J  
Address        111 WESTWOOD PLACE  
                  SUITE 400  
City-State-Zip: BRENTWOOD TN 37027

*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: CHAD C. WHITE**

**SECRETARY**

**03/31/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date