#### 2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0500003566

Entity Name: SUMMERVILLE AT CARROLLWOOD, 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: 20-3014229

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

## Authorized Person(s) Detail :

Title	MGRM	Title	CEO, PRESIDENT
Name	SUMMERVILLE SENIOR LIVING, INC	Name	BAIER, LUCINDA M
Address	111 WESTWOOD PLACE SUITE 400	Address	111 WESTWOOD PLACE SUITE 400
City-State-Zip:	BRENTWOOD TN 37027	City-State-Zip:	BRENTWOOD TN 37027
Title	EVP	Title	EVP AND SECRETARY
Name	BOWMAN, KEVIN W.	Name	WHITE, CHAD C.
Address	111 WESTWOOD PLACE SUITE 400	Address	111 WESTWOOD PLACE SUITE 400
City-State-Zip:	BRENTWOOD TN 37027	City-State-Zip:	BRENTWOOD TN 37027
Title	CFO	Title	SVP
Name	SWAIN, STEVEN	Name	LESKOWICZ, JOANNE
Address	111 WESTWOOD PLACE SUITE 400	Address	6737 W WASHINGTON STREET SUITE 2300
City-State-Zip:	BRENTWOOD TN 37027	City-State-Zip:	MILWAUKEE WI 53214

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

04/20/2022

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date