

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000002766

**Entity Name:** CLEARBROOK TREATMENT CENTERS, LLC

**Current Principal Place of Business:**

6100 TOWER CIRCLE, SUITE 1000  
FRANKLIN,, TN 37067

**Current Mailing Address:**

6100 TOWER CIRCLE, SUITE 1000  
FRANKLIN,, TN 37067 US

**FEI Number: 47-2215058**

**Certificate of Status Desired: No**

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

ORIORNE, CRAIG  
939 CLENT MOORE RD  
BOCA RATON, FL 33487 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            MEMBER  
Name            CRC HEALTH, LLC  
Address        6100 TOWER CIRCLE, SUITE 1000  
City-State-Zip: FRANKLIN, TN 37067

*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: CRC HEALTH, LLC**

**MEMBER**

**05/20/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date