

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000005355

**Entity Name:** ACC OF FLORIDA, INC.**Current Principal Place of Business:**1150 NORTHMEADOW PARKWAY  
SUITE 100  
ROSWELL, GA 30076**Current Mailing Address:**1150 NORTHMEADOW PARKWAY  
SUITE 100  
ROSWELL, GA 30076 US**FEI Number:** 20-3664317**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
1200 S. 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	PRESIDENT / CEO
Name	DEASON, RICHARD
Address	1150 NORTHMEADOW PARKWAY SUITE 100
City-State-Zip:	ROSWELL GA 30076

Title	VP / CFO
Name	BROWN, ROBERT
Address	7 E. CONGRESS STREET, SUITE 801
City-State-Zip:	SAVANNAH GA 31401

Title	VP / COO
Name	KLAMKE, CHRIS
Address	1150 NORTHMEADOW PARKWAY SUITE 100
City-State-Zip:	ROSWELL GA 30076

Title	PROJECT MANAGER
Name	ADAMS, CHARLES B.
Address	1150 NORTHMEADOW PARKWAY SUITE 100
City-State-Zip:	ROSWELL GA 30076

Title	VP - BUSINESS ADMINISTRATION
Name	SCHLUETER, KATE
Address	1150 NORTHMEADOW PARKWAY SUITE 100
City-State-Zip:	ROSWELL GA 30076

*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:** KATE SCHLUETERVP-BUSINESS  
ADMINISTRATION

01/04/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date