
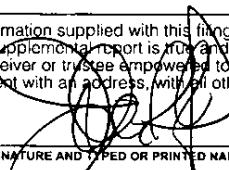


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90075 007 \*\*\*150.00

<b>DOCUMENT # F97000002734</b> 1. Entity Name <b>ARC SUN CITY CENTER, INC.</b>					
Principal Place of Business <b>111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027</b>			Mailing Address <b>111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>330 N. Wabash</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>Suite 1400</b>			
City & State		City & State <b>Chicago, IL</b>			
Zip	Country	Zip	Country	4. FEI Number <b>62-1689052</b>	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP KAESTNER, H T <input checked="" type="checkbox"/> Delete 111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Co-President/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition John P. Rijos 330 N. Wabash, #1400 Chicago, IL 60611	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP MONEY, JAMES T <input checked="" type="checkbox"/> Delete 111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027		TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Mark W. Ohlendorf 6737 W. Washington, #2300 Milwaukee, WI 53214	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP HICKS, GEORGE T <input checked="" type="checkbox"/> Delete 111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027		TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition T. Andrew Smith 111 Westwood Drive, #200 Brentwood, TN 37027	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO SHERIFF, W.E. <input type="checkbox"/> Delete 111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Co-CEO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO <input checked="" type="checkbox"/> Delete RICHARDSON, BRYAN 111 WESTWOOD PLACE SUITE 200 BRENTWOOD, TN 37027		TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Kristin A. Ferge 6737 W. Washington, #2300 Milwaukee, WI 53214	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: By:</b>  <b>John P. Rijos, Co-President</b> <b>4/10/07</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					