

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000015763

**Entity Name:** ARC SERVICES GROUP, LLC**Current Principal Place of Business:**5215 HIGHWAY AVE  
JACKSONVILLE, FL 32254**Current Mailing Address:**5215 HIGHWAY AVE  
JACKSONVILLE, FL 32254**FEI Number:** 81-5076087**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, JAMES R  
5515 HIGHWAY AVE  
JACKSONVILLE, FL 32254 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 AMBR  
Name WILLIAMS, JAMES R  
Address 12842 SWAMP OWL LANE  
City-State-Zip: JACKSONVILLE FL 32258

Title AMBR  
Name WILLIAMS, JOHN R JR  
Address 4401 SR 21  
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title CFO  
Name BRADFORD, ERIC NEWMAN  
Address 9589 MAIDSTONE MILL DR W  
City-State-Zip: JACKSONVILLE FL 32244

Title VP  
Name WILLHOITE, KENNETH  
Address 3621 DOVE TAIL LANE  
City-State-Zip: LAKELAND FL 33813

Title VP  
Name REIGHARD, TODD  
Address 7 BIRD TREE PL  
City-State-Zip: PALM COAST FL 32137

Title SECRETARY  
Name RUSSELL, JAIME  
Address 4403 STATE ROAD 21  
City-State-Zip: GREEN COVE SPRINGS FL 32043

*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:** ERIC BRADFORD

CFO

07/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date