2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01331

Entity Name: PACE CENTER FOR GIRLS, INC.

Current Principal Place of Business:

ONE WEST ADAMS STREET SUITE 301

JACKSONVILLE, FL 32202

FILED Jan 06, 2016 Secretary of State CC8534950044

Current Mailing Address:

ONE WEST ADAMS STREET SUITE 301 JACKSONVILLE, FL 32202 US

FEI Number: 59-2414492 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COOKE AND MEUX, PA 501 RIVERSIDE AVENUE SUITE 903 JACKSONVILLE, FL 32202 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 Title P. CEO Name WAHBY, ROBIN Name MARX, MARY

Address ONE WEST ADAMS STREET Address ONE WEST ADAMS STREET, SUITE

SUITE 301

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

Title TR Title **SECRETARY** Name BARNES, MARK Name DUPUTY, GRETA

Address Address ONE WEST ADAMS STREET

ONE WEST ADAMS STREET SUITE 301 SUITE 301

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

Title CHIEF BUSINESS OFFICER Title **CHAIRMAN** GILES, THRESA SNEAD, MARK Name Name

Address ONE WEST ADAMS STREET Address ONE WEST ADAMS STREET

SUITE 301 SUITE 301

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

CHIEF PROGRAM OFFICER CHIEF EXTERNAL AFFAIRS OFFICER Title Title

Name BRODNAX, SHANA Name JONES, NONA

Address ONE WEST ADAMS STREET Address ONE WEST ADAMS STREET

SUITE 301 SUITE 301

JACKSONVILLE FL 32202 JACKSONVILLE FL 32202 City-State-Zip: City-State-Zip:

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

01/06/2016 SIGNATURE: THRESA GILES CHIEF BUSINESS **OFFICER**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

CHIEF ORGANIZATIONAL DEVELOPMENT OFFICER Title

Name CANCEL, YESSICA

ONE WEST ADAMS STREET Address

SUITE 301

City-State-Zip: JACKSONVILLE FL 32202