

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01331

FILED
Jan 06, 2016
Secretary of State
CC8534950044

Entity Name: PACE CENTER FOR GIRLS, INC.

Current Principal Place of Business:

ONE WEST ADAMS STREET
SUITE 301
JACKSONVILLE, FL 32202

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 VC
Name WAHBY, ROBIN
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

Title P, CEO
Name MARX, MARY
Address ONE WEST ADAMS STREET, SUITE
301
City-State-Zip: JACKSONVILLE FL 32202

Title TR
Name BARNES, MARK
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY
Name DUPUTY, GRETA
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

Title CHIEF BUSINESS OFFICER
Name GILES, THRESA
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

Title CHAIRMAN
Name SNEAD, MARK
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

Title CHIEF PROGRAM OFFICER
Name BRODNAX, SHANA
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

Title CHIEF EXTERNAL AFFAIRS OFFICER
Name JONES, NONA
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202

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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.

SIGNATURE: THRESA GILES

**CHIEF BUSINESS
OFFICER**

01/06/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHIEF ORGANIZATIONAL DEVELOPMENT
OFFICER
Name CANCEL, YESSICA
Address ONE WEST ADAMS STREET
SUITE 301
City-State-Zip: JACKSONVILLE FL 32202