2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2024
Secretary of State
1769776343CC

DOCUMENT# F23000001154

Entity Name: CHAPIN HALL CENTER FOR CHILDREN, INC.

Current Principal Place of Business:

1313 E. 60TH STREET
CHICAGO, IL 60637

Current Mailing Address:

1313 E. 60TH STREET
CHICAGO, IL 60637 US

FEI Number: 36-2167012

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	DIRECTOR
Name	WALKER, BJ
Address	1313 E. 60TH STREET
City-State-Zip:	CHICAGO IL 60637

Title	DIRECTOR, VP
Name	GUPTA, CHAULA
Address	200 W. ADAMS STREET SUITE 1175
City-State-Zip:	CHICAGO IL 60606

Title	DIRECTOR
Name	GORMAN-SMITH, DEBORAH PH.D.
Address	969 E. 60TH STREET
City-State-Zip:	CHICAGO IL 60637

Title	SECRETARY
Name	ARNOLD, JENNIFER
Address	1313 E. 60TH STREET
City-State-Zip:	CHICAGO IL 60637

Title	DIRECTOR
Name	SAMUELS, BRYAN
Address	1313 E. 60TH STREET
City-State-Zip:	CHICAGO IL 60637

Title	DIRECTOR
Name	ABEBE, DANIEL
Address	1313 E. 60TH STREET
City-State-Zip:	CHICAGO IL 60637

Title	DIRECTOR
Name	MILLER, DORIANE PH.D.
Address	5841 S. MARYLAND AVENUE
City-State-Zip:	CHICAGO IL 60637

Title	TREASURER
Name	PEARLMAN, JOANNE
Address	1313 E. 60TH STREET
City-State-Zip:	CHICAGO IL 60637

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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: BRYAN SAMUELS DIRECTOR 01/29/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KINZLER, KATHERINE PH.D.
Address 5848 S. UNIVERSITY AVENU
City-State-Zip: CHICAGO IL 60637

Title DIRECTOR
Name CARON, MARY ELLEN PH.D.
Address 66 E. RANDOLPH STREET
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR
Name RALLINS, QUINN
Address 9026 SOUTH CLAREMONT AVE
City-State-Zip: CHICAGO IL 60643

Title DIRECTOR
Name MARICELA , GARCIA
Address 1919 W. CULLERTON ST
City-State-Zip: CHICAGO IL 60608

Title DIRECTOR
Name CASTELLUCCI, PAUL
Address 1313 E. 60TH STREET
City-State-Zip: CHICAGO IL 60637

Title DIRECTOR
Name ROGERS, SELWYN
Address 1313 E. 60TH STREET
City-State-Zip: CHICAGO IL 60637