2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01331

FILED Jaņ 1<u>2, 2</u>009 Secretary of State

Entity Name: PACE CENTER FOR GIRLS, INC.

Current Principal Place of Business: New Principal Place of Business:

ONE WEST ADAMS STREET

SUITE 301

JACKSONVILLE, FL 32202

New Mailing Address: Current Mailing Address:

ONE WEST ADAMS STREET SUITE 301

JACKSONVILLE, FL 32202 US

FEI Number: 59-2414492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BLASS, JEFF BLAIR, PENELOPE Name: Name:

120 S RIDGEWOOD AVE Address: 401 E LAS OLAS BLVD 21ST FLOOR Address:

City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: FT LAUDERDALE, FL 33301

Title: () Delete Title: (X) Change () Addition

GALLAGHER, DONNA Name: MARX, MARY Name:

Address: ONE WEST ADAMS STREET, SUITE 301 Address: ONE WEST ADAMS STREET. SUITE 301

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

Title: () Delete Title: TR (X) Change () Addition

MARX, JAMES BLASS, JEFF Name: Name:

2570 W INTERNATIONAL SPEEDWAY BLVD STE 100 Address: 547 LAKE ROAD Address:

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: DAYTONA BEACH, FL 32114

Title: () Delete Title: () Change () Addition

Name: PARKER, ELLEN Name: Address: 6990 LAKE ELLENOR DR Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip:

VC Title: () Delete Title: VC (X) Change () Addition

ZEGEL, CAROLE Name: Name: ZEGEL, CAROLE 120 W UNIVERSITY AVE 11011 NW 12TH PLACE Address: Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32606

Title: (X) Delete Title: () Change () Addition

TABET, TAREK Name: Name: Address: ONE WEST ADAMS STREET, SUITE 301 Address: JACKSONVILLE, FL 32202 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARY MARX Ρ 01/12/2009