2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008938

FILED Jan 11, 2012 Secretary of State

Entity Name: ACE MENTOR PROGRAM OF NORTHEAST FLORIDA, INC.

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

701 WEST ADAMS STREET JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

701 WEST ADAMS STREET JACKSONVILLE, FL 32204

FEI Number: 20-5462738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRITT, ARNOLD D JR 707 PENINSULAR PLACE JACKSONVILLE, FL 32204 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

OFFICERS AND DIRECTORS:

Title: D

Name: RAMSEY, DENISE M PE

Address: % THE HASKELL CO - 111 RIVERSIDE AVE

City-St-Zip: JACKSONVILLE, FL 32202

Title: D

Name: HULL, TERRY PE

Address: 10150 DEERWOOD PARK BLVD BLDG 300 STE 300

City-St-Zip: JACKSONVILLE, FL 32256

Title: D

Name: QUICK, CHANTELLE Address: 1902 FOREST AVE

City-St-Zip: NEPTUNE BEACH, FL 32266

Title:

Name: HANSEN, KIMBERLY PE

Address: C/O ELKINS -701 WEST ADAMS STREET, SUITE 2

City-St-Zip: JACKSONVILLE, FL 32204

Title:

Name: ROBBINS, BROOKE AIA

Address: C/O KBJ ARCHITECTS-510 NORTH JULIA STREET

City-St-Zip: JACKSONVILLE, FL 32202

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: ARNOLD D. TRITT, JR. RA 01/11/2012