2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2015
Secretary of State
CC9798481185

DOCUMENT# N01331

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	Title	P, CEO
Name	WAHBY, ROBIN	Name	MARX, MARY
Address	ONE WEST ADAMS STREET SUITE 301	Address	ONE WEST ADAMS STREET, SUITE 301
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202
Title	TR	Title	SECRETARY
Name	BARNES, MARK	Name	PARKER, ELLEN
Address	ONE WEST ADAMS STREET SUITE 301	Address	ONE WEST ADAMS STREET SUITE 301
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202
Title	CHIEF BUSINESS OFFICER	Title	CHAIRMAN
Name	GILES, THRESA	Name	SNEAD, MARK
Address	ONE WEST ADAMS STREET SUITE 301	Address	ONE WEST ADAMS STREET SUITE 301
City-State-Zip:	JACKSONVILLE FL 32202	City-State-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: THRESA GILES — CHIEF FINANCIAL OFFICER — 01/12/2015

Electronic Signature of Signing Officer/Director Detail — Date