

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000002246

Entity Name: ACE MENTOR PROGRAM OF DADE COUNTY FLORIDA, INC.

Current Principal Place of Business:

8200 NW 41 STREET
SUITE 305
DORAL, FL 33166

Current Mailing Address:

8200 NW 41 STREET
SUITE 305
DORAL, FL 33166 US

FEI Number: 46-2289568

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOTSCHALL, ANDREW
8200 NW 41 STREET
SUIT 305
DORAL, FL 33166 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: ANDREW GOTSCHALL

03/19/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name LEON, ROBERTO
Address 8200 NW 41 STREET
SUITE 305
City-State-Zip: DORAL FL 33166

Title SECRETARY
Name JIMENEZ, SARA
Address 800 DOUGLAS ENTRANCE
NORTH TOWER, 2ND FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT
Name GOTSHALL, ANDREW
Address 8200 NW 41 STREET
SUITE 305
City-State-Zip: DORAL FL 33166

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: ROBERTO LEON

VICE PRESIDENT

03/19/2016

Electronic Signature of Signing Officer/Director Detail

Date