

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N13000005812

Entity Name: STUDENT ACES, INC.

Current Principal Place of Business:

8895 N. MILITARY TRAIL
SUITE 203B
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

8895 N. MILITARY TRAIL
SUITE 203B
PALM BEACH GARDENS, FL 33410 US

FEI Number: 46-3081102

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, J.L.
8895 N. MILITARY TRAIL
SUITE 203B
PALM BEACH GARDENS, FL 33410 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 P
Name MARTINEZ, J.L.
Address 7750 ARBOR CREST WAY
City-State-Zip: PALM BEACH GARDENS FL 33412

Title VP
Name KORNAHRENS, ROBERT
Address 1950 NW 22ND STREET
City-State-Zip: FORT LAUDERDALE FL 33311

Title D
Name BOLDIN, DIONNE
Address PO BOX 412
City-State-Zip: PAHOKEE FL 33476

Title SECRETARY
Name LEVIN, JAMIE
Address 221 SEDONA WAY
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TREASURER
Name KITSON, SYD
Address 4500 PGA BLVD SUITE 400
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D
Name JOHNSON, CHARLES
Address 10097 CLEARY BLVD STE.23
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name GANNON, CHRIS
Address 3333 NORTHLAKE BLVD
#8
City-State-Zip: PALM BEACH GARDENS FL 33403

Title DIRECTOR
Name ARMSTRONG, DAVID
Address 16401 NW 37TH AVE
City-State-Zip: MIAMI GARDENS FL 33054

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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: J.L. MARTINEZ

PRESIDENT

06/09/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STEPHENSON, DWIGHT
Address 6241 N DIXIE HWY #A
City-State-Zip: FORT LAUDERDALE FL 33334

Title DIRECTOR
Name POLITZINER, STEVE
Address 777 SOUTH FLAGLER DR.
106
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name RAUCH, PAMELA
Address 700 UNIVERSE BLVD
City-State-Zip: JUNO BEACH FL 33408

Title DIRECTOR
Name IDLETTE, LAVONNE
Address 1419 NORTHEAST 2ND AVE SUITE
#3B
City-State-Zip: FORT LAUDERDALE FL 33304

Title DIRECTOR
Name BROWN, MICHAEL
Address 350 E LAS OLAS
STE 1100
City-State-Zip: FORT LAUDERDALE FL 33310

Title DIRECTOR
Name CONRAD, DAVE
Address 5200 TOWN CENTER CIR
City-State-Zip: BOCA RATON FL 33486