

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000009781

Entity Name: ACE MENTOR PROGRAM OF GREATER FORT LAUDERDALE, INC.**FILED**
Apr 30, 2019
Secretary of State
2462675258CC**Current Principal Place of Business:**3730 COCONUT CREEK PARWAY
200
COCONUT CREEK, FL 33066**Current Mailing Address:**3730 COCONUT CREEK PARKWAY
200
COCONUT CREEK, FL 33066**FEI Number: 82-3055051****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KATZ, JACOB
3730 COCONUT CREEK PARKWAY
200
COCONUT CREEK, FL 33066 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: JACOB KATZ****04/30/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	KATZ, JACOB
Address	3730 COCONUT CREEK PARKWAY 200
City-State-Zip:	COCONUT CREEK FL 33066

Title	VC
Name	THOMPSON, MATTHEW
Address	3730 COCONUT CREEK PARKWAY, SUITE 200
City-State-Zip:	COCONUT CRREK FL 33066

Title	SECRETARY
Name	DAVIS, BRUCE
Address	3730 COCONUT CREEK PARKWAY 200
City-State-Zip:	COCONUT CREEK FL 33066

Title	TREASURER
Name	HO, KAR
Address	3730 COCONUT CREEK PARKWAY 200
City-State-Zip:	COCONUT CREEK FL 33066

Title	COMPLIANCE
Name	SCHROEDER, ANDREW
Address	3730 COCONUT CREEK PARKWAY 200
City-State-Zip:	COCONUT CREEK FL 33066

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: JACOB KATZ**CHAIRMAN****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date