2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2015
Secretary of State
CC6880983407

DOCUMENT# F05000004317

Entity Name: ACG SOUTH FLORIDA, INC.

Current Principal Place of Business:

125 S. WACKER DRIVE
SUITE 3100
CHICAGO, IL 60606

Current Mailing Address:

70 WEST MADISON STREET, SUITE 3500
C/O JAMES T. EASTERLING
CHICAGO, IL 60602 US

FEI Number: 20-3185949

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	DIRECTOR
Name	BRIGHTON, ROBERT CJR.
Address	200 E. BROWARD BLVD.
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	DIRECTOR
Name	DUFFY, JAMES
Address	10004-1 NW 83RD STREET
City-State-Zip:	TAMARAC FL 33321

Title	DIRECTOR
Name	GULLMAN, JOHN D.
Address	110 E. BROWARD BLVD. SUITE 2050
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	DIRECTOR
Name	CASSEL, JAMES S.
Address	801 BRICKELL AVENUE SUITE 1900
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	VANDENBERT, PETER JR.
Address	550 S. DIXIE HIGHWAY, SUITE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	DIRECTOR
Name	CRAIG, JAMES P.
Address	200 EAST LAS OLAS BLVD. SUITE 1200
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	DIRECTOR
Name	CARROLL, MARY V.
Address	ONE SOUTHEAST THIRD AVENUE SUITE 2500
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	GORDON, KEVIN J.
Address	306 ALCAZAR SUITE 301
City-State-Zip:	CORAL GABLES FL 33134

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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: JOHN K. MAJER PRESIDENT 04/29/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HICKS, THOMAS H.
Address 3508 SAHARA SPRINGS BLVD.
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name POLANIA, ANGELA
Address 1001 BRICKELL BAY DRIVE, 27TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name SIMIONE, J. JOHN
Address 249 ROYAL PALM WAY
SUITE 400
City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR
Name ROLOFF, ARI
Address 1200 BRICKELL AVENUE
SUITE 700
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name CRAIG, LILY
Address 110 E. BROWARD BLVD.
17TH FLOOR
City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR, PRESIDENT
Name MAJER, JOHN K.
Address 1555 PALM BEACH LAKES BLVD.
SUITE 1400
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER, DIRECTOR
Name SATYAKETU, PAVAN
Address 1961 NW 150TH AVENUE
SUITE 204
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR, SECRETARY
Name WHITE, ROBERT C. JR.
Address 450 EAST LAS OLAS BLVD.
#1400
City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR
Name ALVEREZ, CARLOS
Address 205 DATURA STREET
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name CURRY, MELISSA
Address 350 EAST LAS OLAS BOULEVARD
SUITE 1800
City-State-Zip: FT. LAUDERDALE FL 33301