

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003532

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** FLORIDA STATE FOSTER/ADOPTIVE PARENT ASSOCIATION, INC

**Current Principal Place of Business:**

4100 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

4100 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:** 59-3401538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WYNN, HARRIETT E MS  
70 W 58TH ST  
JACKSONVILLE, FL 32208 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PETKOVICH, GERTRUDE  
Address: 21731 SW 97TH COURT  
City-St-Zip: CUTLER BAY, FL 33190

Title: VP  
Name: WALLACE, LASHAUN  
Address: 24287 SW 114TH COURT  
City-St-Zip: MIAMIA, FL 24287

Title: EVP  
Name: WYNN, HARRIETT E  
Address: 70 W. 58TH ST  
City-St-Zip: JACKSONVILLE, FL 32208

Title: SECT  
Name: BYRD, CURTIS  
Address: 1011 N 20TH STREET  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: TR  
Name: BOND, MARIA  
Address: 4100 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: RVP  
Name: BLACKSHEAR, LILLIE B  
Address: 11776 TUMBLEWEED WAY  
City-St-Zip: JACKSONVILLE, FL 32218

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: MARIA BOND

ED

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date