## 2007 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

## DOCUMENT # N06000003755

1. Entity Name
THE ADVISORY COUNCIL FOR THE FOSTER



**FILED** 

Mar 01, 2007 8:00 am Secretary of State

03-01-2007 90015 009 \*\*\*\*70.00

		OGRAM OF AL			c.		Tige 1					
218 SE 24TH STREET 2		218 9	Address SE 24TH STREET SVILLE, FL 3264	1			4	0026	868			
2. Principal F	Place of Busines	s - No P.O. Box #	3. Maili	ng Address							<b>                                    </b>	
Suite, Apt.	. #, etc.		Suit	te, Apt. #, etc.				02082007	Chg-NP	CR2	E037 (12/06)	
City & Stat	te		City	& State			-	4. FEI Number	3929	267	<del>- + -</del>	oplied For ot Applicable
Zíp		Country	Zip		Cou	intry		5. Certificate o			\$8.75 Add Fee Require	
	6. Name an	d Address of Curren	t Registered	d Agent				7. Name and A	ddress of l	lew Register	ed Agent	
FAI MÍ FN	I, REBECCA	М				Name						
	TH STREET					Street A	ddress (F	P.O. Box Number	is Not Acce	ptable)		,
GAINESVI	ILLE, FL 326	541										
						City					Zip Cod	e
	e named entity si	ubmits this statement (	for the purpo	ose of changing its	registere	ed office or	register	ed agent, or both	, in the State	of Florida. I	am familiar with,	and accept
SIGNATURE		name of registered ager	nt and title if appli	icable. (NOTE:	: Registered	d Agent signati	ure required			DA	τε	<del></del>
SIGNATURE		is \$61.25	nt and title if appli	9. Election Cam Trust Fund C	npaign F	inancing	ure required	\$5.00 May Be Added to Fees		Make ch	ाट neck payable t partment of S	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

Connic J. Hartsock

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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