2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000046

Entity Name: FOUNDATION FOR FOSTER CHILDREN, INC.

FILED Feb 27, 2014 **Secretary of State** CC7189980795

Current Principal Place of Business:

2265 LEE ROAD SUITE 203

WINTER PARK, FL 32789

Current Mailing Address:

2265 LEE ROAD **SUITE 203**

WINTER PARK, FL 32789 US

FEI Number: 26-1682601 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COSGROVE, LAURA 2807 EDGEWATER DRIVE ORLANDO, FL 32804 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:

OFFICER Title Title **PRESIDENT**

Name CARLTON, MICHELLE Name COSGROVE, LAURA Address 1143 PRESERVE POINT DRIVE Address 370 WATERFALL LANE WINTER PARK FL 32789 City-State-Zip: WINTER PARK FL 32789 City-State-Zip:

Title Т Title 0

Name CARLINE, KELLY Name LEE, AMY

1000 UNIVERSTAL STUDIOS PLAZA Address 2265 LEE ROAD Address

SUITE 203

City-State-Zip: ORLANDO FL 32819 City-State-Zip: WINTER PARK FL 32789

Title

VΡ Title Name MILLER, MEGAN BRENNER, ALANA Name

Address 2265 LEE ROAD Address 1330 RADCLYFFE ROAD SUITE 203

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: ORLANDO FL 32804

Title **DIRECTOR** Title **DIRECTOR** Name LEE, LARA Name WILSON, EVELYN

Address 2265 LEE ROAD Address 2265 LEE ROAD

SUITE 203 SUITE 203

City-State-Zip: WINTER PARK FL 32789 WINTER PARK FL 32789 City-State-Zip:

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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.

02/27/2014 SIGNATURE: LAURA COSGROVE **PRESIDENT**

Officer/Director Detail Continued:

DIRECTOR Title ASHBY, KATE Name Address 2265 LEE ROAD

SUITE 203

City-State-Zip: WINTER PARK FL 32789

DIRECTOR Title Name HOWARD, DON Address 2265 LEE ROAD SUITE 203

WINTER PARK FL 32789 City-State-Zip:

Title DIRECTOR

HOSTETTER, SANDY Name

Address 2265 LEE ROAD

SUITE 203

WINTER PARK FL 32789 City-State-Zip:

Title DIRECTOR CURTIS, SUSAN Name Address 2265 LEE ROAD SUITE 203

City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR

REYNOLDS, MAGGIE Name

Address 2265 LEE ROAD

SUITE 203

WINTER PARK FL 32789 City-State-Zip:

Title **DIRECTOR** PICCOLO, RON Name Address 2265 LEE ROAD SUITE 203

City-State-Zip: WINTER PARK FL 32789

DIRECTOR Title Name SMALL, SHANA Address 2265 LEE ROAD SUITE 203

WINTER PARK FL 32789 City-State-Zip:

Title **DIRECTOR** PATE, ANDREA Name Address 2265 LEE ROAD SUITE 203

City-State-Zip: WINTER PARK FL 32789

Title **DIRECTOR** TATE, JOSE Name Address 2265 LEE ROAD

SUITE 203

City-State-Zip: WINTER PARK FL 32789