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: DIANA LEDONNI-KOPEC

Electronic Signature of Signing Officer/Director Detail

3272 SANDY RIDGE DRIVE CLEARWATER, FL 33761

Current Mailing Address:

3272 SANDY RIDGE DRIVE CLEARWATER, FL 33761

FEI Number: 84-2775918

Name and Address of Current Registered Agent:

LEDONNI-KOPEC, DIANA 3272 SANDY RIDGE DRIVE CLEARWATER, FL 33761 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

Officer/Director Detail:

| Title | DPTS | Title | DVP |
|-----------------|------------------------|-----------------|------------------------|
| Name | LEDONNI-KOPEC, DIANA | Name | KOPEC, ROBERT |
| Address | 3272 SANDY RIDGE DRIVE | Address | 3272 SANDY RIDGE DRIVE |
| City-State-Zip: | CLEARWATER FL 33761 | City-State-Zip: | CLEARWATER FL 33761 |
| Title | D | | |
| Name | CRUM, TAMMY | | |
| Address | 3272 SANDY RIDGE DRIVE | | |
| City-State-Zip: | CLEARWATER FL 33761 | | |

PRESIDENT

Date

Certificate of Status Desired: No

FILED Apr 13, 2020 Secretary of State 1886472621CC

> 04/13/2020 Date

2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N1900008620

Entity Name: FEEDING THE FOSTERS, INC.

Current Principal Place of Business: