

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000805

Entity Name: MIAMI DADE COUNTY FOSTER & ADOPTIVE PARENT ASSOCIATION, INC.

Current Principal Place of Business:

2870 NW 208TH STREET
MIAMI GARDENS, FL 33056

Current Mailing Address:

2870 NW 208TH STREET
MIAMI GARDENS, FL 33056

FEI Number: 65-0599428

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, TRAVIS
1955 NW 47TH STREET
MIAMI , FL 33142 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: TRAVIS DAVIS

01/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CSEC
Name JONES, JOANN
Address 2870 NW 208 ST
City-State-Zip: MIAMI FL 33056

Title PRES
Name DAVIS, TRAVIS
Address 1955 NW 47TH STREET
City-State-Zip: MIAMI FL 33142

Title VP
Name JOHNSON, BARBARA
Address 10850 SW 220 STREET
City-State-Zip: MIAMI FL 33170

Title EXECUTIVE DIRECTOR
Name JENKINS, SHAMELE EXEC,DIRECTOR
Address 1271 N.W. 172 STREET
City-State-Zip: MIAMI GARDENS FL 33169

Title T.
Name RIVERS, ETHEL
Address 2951 NW 174TH STREET
City-State-Zip: MIAMI GARDENS FL 33056

Title PAL
Name HUGHES, CYNTHIA
Address 13721 VAN BUREN STREET
City-State-Zip: MIAMI FL 33176

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: JOANN JONES

SECRETARY

01/30/2025

Electronic Signature of Signing Officer/Director Detail

Date