

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724486

FILED
Mar 19, 2012
Secretary of State

Entity Name: FOSTER PARENTS ASSOCIATION OF ALACHUA COUNTY, INC.

Current Principal Place of Business:

5950 NW 1ST PLACE
SUITE A
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

5950 NW 1ST PLACE
SUITE A
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 23-7292630 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KING, DOROTHY
1831 SW 80TH DRIVE
GAINESVILLE, FL 32607 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: PD
Name: KING, DOROTHY
Address: 1831 SW 80TH DRIVE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: VD
Name: ANTHONY, COLEEN
Address: 3301 SW 13 ST #T279
City-St-Zip: GAINESVILLE, FL 32608 US

Title: TD
Name: LOCKE, RONALD A
Address: 8909 SW 122ND STREET
City-St-Zip: GAINESVILLE, FL 32608 US

Title: SD
Name: STATON, BRENDA
Address: 7491 NW 165 ST
City-St-Zip: FANNING SPRING, FL 32693

Title: D
Name: NELSON, SABRINA
Address: 8203 NW 31 AVENUE #I-59
City-St-Zip: GAINESVILLE, FL 32606

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: DOROTHY KING

PD

03/19/2012

Electronic Signature of Signing Officer or Director

_____ Date