

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90946 040 ****70.00

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1. Entity Name

**MIAMI-DADE SOUTH CHILDREN FOSTER/ADOPTIVE PARENT
ASSOCIATION, INC.**



Principal Place of Business

**10485 SW 170 TER
MIAMI FL 33157**

Mailing Address

**10485 SW 170 TER
MIAMI FL 33157**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

03-0485888

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22 ST 4 FLR
MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to -
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☒ Delete
NAME **JOHNSON, MCDONALD**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **DV** ☐ Delete
NAME **DALLAS, ANTHONY**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **DS** ☐ Delete
NAME **HARRIS, BETTIE**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **DT** ☐ Delete
NAME **WILLIAMS, MELOR**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Bettie Harris DP** ☒ Change ☐ Addition
NAME
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **DV** ☐ Change ☐ Addition
NAME **Anthony Dallas**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **GS** ☐ Change ☒ Addition
NAME **Gwendolyn Ross**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **DT** ☐ Change ☐ Addition
NAME **Melor Williams**
STREET ADDRESS **10485 SW 170 TER**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachment with an address, with all other like empowered.

SIGNATURE: **Bettie Harris**

REQUIRED

01/10/03

\$05 2384/ET

CR2E037 (10/02)