

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006716

FILED  
Mar 27, 2007  
Secretary of State

**Entity Name:** FLORIDA KEYS FOSTER ADOPTIVE PARENT ASSOCIATION, INC.

**Current Principal Place of Business:**

133 THIRD LANE  
KEY LARGO, FL 33037

**New Principal Place of Business:**

694 DOLPHIN AVE  
KEY LARGO, FL 33037

**Current Mailing Address:**

P.O. BOX 1861  
KEY LARGO, FL 33037

**New Mailing Address:**

**FEI Number:** 20-0141609

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROOKE, BARBARA  
133 THIRD LANE  
KEY LARGO, FL 33037 US

**Name and Address of New Registered Agent:**

REYNAUD, LISA  
694 DOLPHIN AVE  
KEY LARGO, FL 33037 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: LISA REYNAUD

03/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: MILLER, CINDI PRESIDE  
Address: 220 LA PALOMA ROAD  
City-St-Zip: KEY LARGO, FL 33037

Title: SEC ( ) Delete  
Name: BROOKE, BARBARA SECRETA  
Address: 133 THIRD LANE  
City-St-Zip: KEY LARGO, FL 33037

Title: VPRES ( ) Delete  
Name: GRAHAM, SCOTT VICE PR  
Address: 625 ANGELA STREET  
City-St-Zip: KEY WEST, FL 33040

Title: TREA ( ) Delete  
Name: CUNNINGHAM, CHRISTINE  
Address: 128 PACIFIC AVENUE  
City-St-Zip: TAVERNIER, FL 33070

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC (X) Change ( ) Addition  
Name: LISA, REYNAUD SECRETA  
Address: 694 DOLPHN AVENUE  
City-St-Zip: KEY LARGO, FL 33037

Title: VPRES (X) Change ( ) Addition  
Name: KIM, ELLIS VICE PR  
Address: 11 CORAL DRIVE  
City-St-Zip: KEY LARGO, FL 33037

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LISA REYNAUD

SEC

03/27/2007

Electronic Signature of Signing Officer or Director

Date