

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000489

FILED
Aug 15, 2006
Secretary of State

Entity Name: FOR THE CHILDREN FOSTER/ADOPTIVE COALITION, INC.

Current Principal Place of Business:

3331 PIPKIN RD
BONIFAY, FL 32425

New Principal Place of Business:

2353 HODGE LANE
BONIFAY, FL 32425

Current Mailing Address:

3331 PIPKIN RD
BONIFAY, FL 32425 US

New Mailing Address:

2353 HODGE LANE
BONIFAY, FL 32425 US

FEI Number: 20-2129553 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARRIS, TAMMY J
3331 PIPKIN RD
BONIFAY, FL 32425 US

Name and Address of New Registered Agent:

HODGE, CHARLENE J
2353 HODGE LANE
BONIFAY, FL 32425 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: CHARLENE HODGE

08/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARRIS, TAMMY
Address: 3331 PIPKIN RD
City-St-Zip: BONIFAY, FL 32425 US

Title: VP () Delete
Name: CORBIN, FAYE
Address: 735 GILBERT DR.
City-St-Zip: CHIPLEY, FL 32428 US

Title: S () Delete
Name: HODGE, CHARLENE
Address: 2353 HODGE LANE
City-St-Zip: BONIFAY, FL 32425 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HODGE, CHARLENE
Address: 2353 HODGE LANE
City-St-Zip: BONIFAY, FL 32425 US

Title: VP (X) Change () Addition
Name: CURRY, JAMES
Address: 1602 BETHLEHEM CHURCH ROAD
City-St-Zip: BONIFAY, FL 32425 US

Title: S (X) Change () Addition
Name: HOWELL, DONNA
Address: 1225 HIGHWAY 173
City-St-Zip: GRACEVILLE, FL 32440 US

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: CHARLENE HODGE

P

08/15/2006

Electronic Signature of Signing Officer or Director

Date