

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002411

FILED
Mar 31, 2011
Secretary of State

Entity Name: FOUNDATION FOR CHILDREN & FAMILIES, INC.

Current Principal Place of Business:

1852 SE CARVALHO STREET
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

1852 SE CARVALHO STREET
PORT SAINT LUCIE, FL 34983

New Mailing Address:

FEI Number: 83-0414124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERRE, ANNE L
1852 SE CARVALHO STREET
PORT SAINT LUCIE, FL 34983 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: PIERRE, ANNE L.
Address: 1852 SE CARVALHO STREET
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP
Name: ALCINDOR, PRUDENT
Address: 5685 STRAWBERRY LAKE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: T
Name: ST. PIERRE, MARIE
Address: 2413 S.E. STONECROP STREET
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: S
Name: PIERRE, MARTIN
Address: 563 DAVIS ROAD
City-St-Zip: DELRAY BEACH, FL 33445

Title: D
Name: DARVELLE, FRANCOIS T
Address: 9873 LAWRENCE ROAD
City-St-Zip: BOYNTON BEACH, FL 33436

Title: C
Name: RODRIGUEZ G., GUERLINE
Address: 1882 SW MONTERRY LANE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: ANNE L. PIERRE

PD

03/31/2011

Electronic Signature of Signing Officer or Director

Date