

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009700

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** FOSTERING YOUR FAMILIES FUTURE INC.

**Current Principal Place of Business:**

15292 NW 41 TR  
REDDICK, FL 32686

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2  
REDDICK, FL 32686

**New Mailing Address:**

**FEI Number:** 22-3915974

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAW, KIM R  
4144 NW 152 ST  
REDDICK, FL 32686 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: PRES ( ) Delete  
Name: LAW, KIM R  
Address: 4144 NW 152ND ST  
City-St-Zip: REDDICK, FL 32686

Title: VP ( ) Delete  
Name: LAW, ROBERT R JR.  
Address: PO BOX 184  
City-St-Zip: REDDICK, FL 32686

Title: SEC ( ) Delete  
Name: CAMPBELL, DINEASE  
Address: 10640 NW 190TH ST  
City-St-Zip: MICANOPY, FL 32667

Title: TRES ( ) Delete  
Name: BLAKELY, DARCE R  
Address: 7338 HWY 2301  
City-St-Zip: PANAMA CITY, FL 32404

Title: MGR ( ) Delete  
Name: SHIELDS, DAWN  
Address: PO BOX 556  
City-St-Zip: FAIRFIELD, FL 32634

Title: VMGR ( ) Delete  
Name: COOPER, DONALD  
Address: PO BOX 58  
City-St-Zip: REDDICK, FL 32686

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

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: KIM R LAW

PRES

04/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date