

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000006794

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** ESCAMBIA COUNTY FOSTER ADOPTIVE PARENT ASSOCIATION INC

**Current Principal Place of Business:**

250 W BURGESS ROAD  
PENSACOLA, FL 32526

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 17931  
PENSACOLA, FL 32522

**New Mailing Address:**

**FEI Number:** 20-5692361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GANLEY, CATHERINE E DIR.  
198 WILDFLOWER LANE  
PENSACOLA, FL 32514 US

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

GOODSON, TINA M DIR.  
1166 BROWNFIELD ROAD  
PENSACOLA, FL 32526 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: TINA M GOODSON

03/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BRANCHCOMB, PATRICIA  
Address: 7433 MOBILE HWY  
City-St-Zip: PENSACOLA, FL 32526

Title: DIR  
Name: GOODSON, TINA  
Address: 1166 BROWNFIELD ROAD  
City-St-Zip: PENSACOLA, FL 32526

Title: SEC  
Name: ANTONELLI, DESIREE  
Address: 3315 W. GONZALES STREET  
City-St-Zip: PENSACOLA, FL 32505

Title: VP  
Name: WISE, SISSY VP  
Address: 121 MYRTLEWOOD DRIVE  
City-St-Zip: PENSACOLA, FL 32503

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: TINA M GOODSON

DIR

03/04/2010

Electronic Signature of Signing Officer or Director

Date