

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17069

FILED
Apr 12, 2012
Secretary of State

Entity Name: FOSTER & ADOPTIVE PARENT ASSOCIATION OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

4100 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

Current Mailing Address:

4100 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 59-2725289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANK, JULIANNE R
11380 PROSPERITY FARMS RD. #114
PALM BEACH GARDENS, FL 33410 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: ALVAREZ, DOROTHY
Address: 5466 EMERALD DUNES DRIVE #205
City-St-Zip: WEST PALM BEACH, FL 33411

Title: TR
Name: ZACHARIA, HYMAN
Address: 5589 OKEECHOBEE BLVD, STE 104
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VP
Name: FILASKY, ROD
Address: 1201 US HIGHWAY 1, SUITE 202
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: BD
Name: COX, BARBARA
Address: 5938 BARBADOS WAY
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: CS
Name: NEWCOMER, SUZETTE
Address: 35 PERRY AVENUE
City-St-Zip: GREENACRES, FL 33467

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: MARIA BOND

ED

04/12/2012

Electronic Signature of Signing Officer or Director

Date