2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000003334

FILED Jan 19, 2010 Secretary of State

Entity Name: TALLAHASSEE AREA FOSTER PARENTS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1414 INDIAN HEAD DR TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

PO BOX 4162

TALLAHASSEE, FL 323154162

FEI Number: 59-3401802 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: Name and Address of New Registered Agent:

DUPOINT, LILLIE D CONDRY, KAREN H
402 SE 4TH ST 1313 NANCY DRIVE

HAVANA, FL 32333 US TALLAHASSEE, FL 32301 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: KAREN CONDRY 01/19/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: ST

Name: HARRIS, GAIL

Address: 2024 WILLIE FRANCES TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: T

 Name:
 CONDRY, EVERETT

 Address:
 1313 NANCY DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32301

Title:

 Name:
 ALBRITTON, PEARLIE

 Address:
 3521 LORO LANE

 City-St-Zip:
 TALLAHASSEE, FL 32310

Title:

Name: HARRIS, JESSIE

Address: 2032 WILLIE FRANCES TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: F

 Name:
 CONDRY, KAREN H

 Address:
 1313 NANCY DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32301

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: KAREN CONDRY P 01/19/2010