2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003532

Entity Name: FLORIDA STATE FOSTER/ADOPTIVE PARENT ASSOCIATION, INC

Current Principal Place of Business:	**New Principal Place of Business:**
900 THE RIALTO VENICE, FL 34285 US	4100 OKEECHOBEE BLVD WEST PALM BEACH, FL 33409 US

Current Mailing Address:	**New Mailing Address:**
70 W. 58TH ST JACKSONVILLE, FL 32208 US	4100 OKEECHOBEE BLVD WEST PALM BEACH, FL 33409 US

FEI Number: 59-3401538   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WYNN, HARRIETT E MS 70 W 58TH ST JACKSONVILLE, FL 32208 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: _____

Electronic Signature of Registered Agent   Date

OFFICERS AND DIRECTORS:

Title: P
Name: HERNANDEZ, KIMBERLY
Address: 11038 LYNN LAKE CIRCLE
City-St-Zip: TAMPA, FL 33625

Title: SECT
Name: PETKOVICH, GERTUDE
Address: 21731 SW 97TH COURT
City-St-Zip: CUTLER BAY, FL 33190

Title: VP
Name: WYNN, HARRIETT E
Address: 70 W. 58TH ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: VP
Name: MCFARLAND, BETSEY
Address: 3105 W. GRACE ST
City-St-Zip: TAMPA, FL 33607

Title: TR
Name: BOND, MARIA
Address: 4100 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: RVP
Name: BLACKSHEAR, LILLIE B
Address: 11776 TUMBLEWEED WAY
City-St-Zip: JACKSONVILLE, FL 32218

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   TR   02/16/2011

Electronic Signature of Signing Officer or Director   Date