**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Mar 04, 2013**
**Secretary of State**
**CC7001577642**

DOCUMENT# 766270

**Entity Name:** INFORMED FAMILIES/THE FLORIDA FAMILY PARTNERSHIP, INC.

**Current Principal Place of Business:**

2490 CORAL WAY
MIAMI, FL 33145-3449

**Current Mailing Address:**

2490 CORAL WAY
MIAMI, FL 33145-3449

**FEI Number: 59-2231894**

**Certificate of Status Desired:** Yes

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

SAPP, PEGGY B
2490 CORAL WAY
MIAMI, FL 33145-3449 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

**Officer/Director Detail :**

| | |
|---|---|
| Title | C |
| Name | HOFMANN, JOHN |
| Address | 420 SOUTH DIXIE HIGHWAY |
| City-State-Zip: | CORAL GABLES FL 33146 |

| | |
|---|---|
| Title | VC |
| Name | LOGAN, NECA |
| Address | 64 CAMDEN DRIVE |
| City-State-Zip: | BAL HARBOUR FL 33154 |

| | |
|---|---|
| Title | T |
| Name | BOINK, JAMES JR. |
| Address | 12715 SW 62ND AVE |
| City-State-Zip: | PINECREST FL 33156 |

| | |
|---|---|
| Title | PD |
| Name | SAPP, PEGGY B |
| Address | 2901 SO. BAYSHORE DR., #8C |
| City-State-Zip: | COCONUT GROVE FL 33133 |

| | |
|---|---|
| Title | S |
| Name | MONTILLA, DEBORAH |
| Address | 1500 BISCAYNE BLVD<br>SUITE 341 |
| City-State-Zip: | MIAMI FL 33132 |

*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: PEGGY B. SAPP PRESIDENT 03/04/2013

Electronic Signature of Signing Officer/Director Detail — Date