

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002366

Entity Name: FEDERATION OF FAMILIES OF FLORIDA, INC.**Current Principal Place of Business:**101 NW 1ST AVE
SOUTH BAY, FL 33439**Current Mailing Address:**101 NW 1ST AVE
SOUTH BAY, FL 33439 US**FEI Number: 52-2313668****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**JENKINS, CYNTHIA VEREE'
101 NW 1ST AVE
SOUTH BAY, FL 33439 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:** CYNTHIA VEREE' JENKINS

05/29/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRES
Name THOMAS, JAMES
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439Title VICE, TREASURER
Name JEFFREY, JACKSON
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439Title DIRECTOR
Name DAVIS, DOROTHY
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439Title CEO
Name CYNTHIA, JENKINS V
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439Title DIRECTOR
Name WALDEN, MARY
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439Title DIRECTOR
Name SHEPPARD, CHILONDRA
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439Title DIRECTOR
Name LITTLE, TRACY
Address 101 NW 1ST AVE
City-State-Zip: SOUTH BAY FL 33439

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: CYNTHIA V. JENKINS

CEO

05/29/2018

Electronic Signature of Signing Officer/Director Detail

Date