2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2019
Secretary of State
7954025508CC

DOCUMENT# N09000001384

Entity Name: MARION COUNTY FOSTER PARENTS ASSOCIATION, INC.

Current Principal Place of Business:

3530 EAST FORT KING STREET
OCALA, FL 34470

Current Mailing Address:

3530 EAST FORT KING STREET
OCALA, FL 34470 US

FEI Number: 38-3796080

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GARRISON, SELENA
3530 EAST FORT KING STREET
OCALA, FL 34470 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: SELENA GARRISON 05/03/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	GARRISON, SELENA
Address	3530 EAST FORT KING STREET
City-State-Zip:	OCALA FL 34470

Title	TREASURER
Name	LEPOINT, ERIN A
Address	720 SE 41ST AVE
City-State-Zip:	OCALA FL 34471

Title	SECRETARY
Name	WELLS, VALERIE
Address	3530 EAST FORT KING STREET
City-State-Zip:	OCALA FL 34470

Title	PUBLICITY
Name	HILL, AMY
Address	3530 EAST FORT KING STREET
City-State-Zip:	OCALA FL 34470

Title	VP
Name	CLARKE, CHELSEA
Address	3530 EAST FORT KING STREET
City-State-Zip:	OCALA FL 34470

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: ERIN A LEPOINT TREASURER 05/03/2019

Electronic Signature of Signing Officer/Director Detail — Date