2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000805

Entity Name: MIAMI DADE COUNTY FOSTER & ADOPTIVE PARENT

ASSOCIATION, INC.

Current Principal Place of Business:

2870 NW 208TH STREET MIAMI GARDENS, FL 33056

Current Mailing Address:

2870 NW 208TH STREET MIAMI GARDENS, FL 33056

FEI Number: 65-0599428 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JENKINS, SHAMELE 1271 NW 172ND STREET MIAMI GARDENS, FL 33169 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

FILED Mar 03, 2015

Secretary of State

CC0783725881

Officer/Director Detail:

Title CSEC Title PRES

NameJONES, JOANNNameJENKINS, SHAMELEAddress2870 NW 208 STAddress1271 NW 172ND STREETCity-State-Zip:MIAMI FL 33056City-State-Zip: MIAMI GARDENS FL 33147

Title VP Title RS

Name HARDEMON, WILLIE Name SMITH, EDYTH

Address 20494 NW 13TH AVENUE Address 21110 N. W. 60TH STREET

City-State-Zip: MIAMI FL 33056 City-State-Zip: MIAMI FL 33142

Title T Title PAL

Name RIVERS, ETHEL Name DAVIS, TRAVIS

Address 2951 NW 174TH STREET Address 1945 N. W. 47TH STREET

City-State-Zip: MIAMI GARDENS FL 33056 City-State-Zip: MIAMI FL 33142

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: SHAMELE JENKINS

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/03/2015